

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

OIL CON. DIV.

Operator Robert L. Bayless 19418		Well API No. 30-039-25050
Address PO Box 168, Farmington NM 87499		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Also: Please revise your records to reflect correct well name from Jicarilla 32 #1 to Jicarilla 31-3-32-1
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla 31-3-32 14779	Well No. 1	Pool Name, Including Formation East Blanco Pic. Cliffs 72400	Kind of Lease State, Federal or Fee	Lease No. Jic. MDA #701-90-0002
Location Unit Letter L : 1565 Feet From The South Line and 795 Feet From The West Line Section 32 Township 31N Range 3W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil n/a	or Condensate	Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas Robert L. Bayless 2813776	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 168, Farmington NM 87499				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
					no	Approx. 11/30/93

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 2/4/91	Date Compl. Ready to Prod. 10/14/93	Total Depth 4120'	P.B.T.D. 3960'					
Elevations (DF, RKB, RT, GR, etc.) 7093 RKB, 7083' GL	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 3789'	Tubing Depth 3793'					
Perforations 3789-3920'			Depth Casing Shoe 4002'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	159'	125 sx., 148' ³					
7-7/8"	4-1/2"	4002'	950 sx., 1589' ³					
	2 3/8	3793						

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D 684	Length of Test 3 hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate n/a
Testing Method (pilot, back pr.) orifice	Tubing Pressure (Shut-in) 1010 psi	Casing Pressure (Shut-in) 1010 psi	Choke Size 3/4"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature
Kevin H. McCord
Printed Name
Nov. 24, 1993
Date

Petroleum Engineer
Title

505-326-2659
Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 29 1993

By SUPERVISOR DISTRICT #3

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.