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

State of New Mexico Energy, Minerals and Natural Resources Departmen,

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

OIL CONSERVATION DIVISION

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

DISTRICT III

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

1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FO								
I. TO TRANSPORT OIL AND NATURAL GAS						Weil API No.			
Bison Petroleum Corporation				30-025-07066					
Address		1	70110 266	~					
Reason(s) for Filing (Check proper box)	e 200, Amaril	lo, Texas	79110-360	or (Please expla	iin)				
New Well	·	Transporter of:		ange effe		5-1-93			
Recompletion		Dry Gas Condensate		J					
Change in Operator If change of operator give name	Casinghead Gas	Condensate							
and address of previous operator									
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including				- Ftion Vind o			of Lease No.		
Lease Name	Well No.					ederal KeXIXX NM-027887			
Bell B Federal Location		J Bawyer Be	m mares	nggoes	t				
Unit Letter P: 600 Feet From The South Line and 660 Feet From The East Line									
Section 20 Townshi	p 9S	Range 38E	, NN	ирм,		L	.ea	County	
III. DESIGNATION OF TRAN	SPORTER OF O	IL AND NATU	RAL GAS				. in to be	mt)	
Name of Authorized Transporter of Oil Petro Source Partners	Address (Give address to which approved copy of this form is to be sent) 9081 Westheimer Ste. 900, Houston, TX 77042								
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)								
Trident NGL, INc.						TX 79710			
If well produces oil or liquids, pive location of tanks.	Unit S∞c. P 20	Twp. Rge 98 38E	ls gas actually	Is gas actually connected? When			7 -1–66		
If this production is commingled with that		<u> </u>	_1	per:					
IV. COMPLETION DATA					ı 	1 10		lorer north	
Designate Type of Completion	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sa	ine Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to	Prod.	Total Depth	L	l	P.B.T.D.			
San openio				<u></u>					
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas I	Pay		Tubing Depth			
Perforations						Depth Casing Shoe			
T CITOTALIONS									
		CEMENTIN	CEMENTING RECORD			SACKS CEMENT			
HOLE SIZE	CASING & TU		DEPTH SET			JAONO GEMENT			
The state of the s	TEOD ALLOW	ADIE	<u> </u>			<u> </u>			
V. TEST DATA AND REQUES OIL WELL (Test must be after r.	ecovery of total volume	of load oil and mus	i be equal to or	exceed top allo	wable for thi	s depth or be for	full 24 how	rs.)	
Date First New Oil Run To Tank	Date of Test		Producing Mo	thod (Flow, pu	mp, gas lift, e	etc.)			
		Casing Pressure			Choke Size				
Length of Test	Tubing Pressure		Casing 1 1030	Casing 1 ressure					
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.			Gas- MCF			
			<u> </u>			<u> </u>			
GAS WELL			150 0 1	AUMOR		Gravity of Con	densate		
Actual Prod. Test - MCF/D	Length of Test		Bbls. Conden	Bbls. Condensate/MMCF		Clarky of Constant			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressu	Casing Pressure (Shut-in)		Choke Size			
results (paos, and pro-									
VI. OPERATOR CERTIFIC	ATE OF COM	PLIANCE		און כטע	ISERV	ATION D	IVISIC	N	
I hereby certify that the rules and regulations of the Oil Conservation				OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Date	Date ApprovedAPR 2 6 1993					
A .		• •							
Linda Scott	Bv	By Paul Kautz Geologist							
Signature Linda Scott, Administrative Secretary				Geol	ogast				
Printed Name	Title				 				
4-22-93 806/358-	0181								

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

Date

- 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.

Telephone No.

- 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.