

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

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

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator K.C. RESOURCES, INC		Well API No. 30-025-08007
Address 2533 S. Hwy 101 #260 Cardiff, CA 92007		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator R.W.K. RESOURCES, INC		

II. DESCRIPTION OF WELL AND LEASE

Lease Name NEW MEXICO "BH"	Well No. 1	Pool Name, Including Formation CAPROCK Devonian EAST	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter C : 660 Feet From The N Line and 1980 Feet From The W Line Section 11 Township 12S Range 32E , NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> TEXAS N.M. PIPELINE	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> WARREN PETROLEUM	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit NW/4	Sec. 11	Twp. 12	Rge. 32	Is gas actually connected? YES	When? 8/2/84

If this production is commingled with that from any other lease or pool, give commingling order number: **PC-555**

OPER. OGRID NO. 122912	ew Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
PROPERTY NO. 15218	al Depth					
POOL CODE 08930	P.B.T.D.					
EFF. DATE 6-23-94	Oil/Gas Pay					
API NO. 30-025-00470 08007	Tubing Depth					
	Depth Casing Shoe					

IV. CASING AND CEMENTING RECORD

O-TRNSP. OGRID NO. 22628	WTR	DEPTH SET	SACKS CEMENT
G-TRNSP. OGRID NO. 24650	2218650		
OIL POD NO. 2218610			
GAS POD NO. 2218630			

equal to or exceed top allowable for this depth or be for full 24 hours.)
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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 **Reiner Klawiter**
Printed Name **REINER KLAWITER** Title **PRESIDENT**
Date **12-3-93** Telephone No. **(619) 943-8448**

OIL CONSERVATION DIVISION

Date Approved **JUN 23 1994**

By **ORIGINAL SIGNED BY JERRY SEXTON**
Title **DISTRICT I SUPERVISOR**

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.