

Submit 3 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

RECEIVED

SEP 16 1991

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

O. C. D.
ARTESIA OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Bass Enterprises Production Co.		Well API No. 30-015-10775
Address P.O. Box 2760 Midland, Texas 79702-2760		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/> from shut-in to producing	
Recompletion <input type="checkbox"/>	Oil <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 Big Eddy Unit	Well No. 8	Pool Name, Including Formation Big Eddy Strawn	Kind of Lease State, Federal or Fee	Lease No. NM 06818
Location Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line Section 30 Township 20S Range 31E, NMPM, Eddy 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"/>	Address (Give address to which approved copy of this form is to be sent) Koch Oil Company, A Division of Koch Ind. Inc. P.O. Box 1558, Breckenridge, Tx. 76024					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Phillips 66 Natural Gas Company Frank Phillips Bldg., Bartlesville, Okla. 74004					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 30	Twp. 20S	Rge. 31E	Is gas actually connected? Yes	When? January 10, 1967

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back	Same Res'v <input checked="" type="checkbox"/>	Diff Res'v
Date Spudded 3-21-66	Date Compl. Ready to Prod. 5-13-66		Total Depth 11,631'		P.B.T.D. 11358'			
Elevations (DF, RKB, RT, GR, etc.) 3560' GR	Name of Producing Formation Strawn		Top Oil/Gas Pay Oil-11,332'		Tubing Depth 11294'			
Perforations 11,332' - 11,352' (81 Holes)					Depth Casing Shoe 11,631'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
20"	16"		802'		600 SX			
13 3/4"	11 3/4"		2162'		800 SX			
10 5/8"	8 5/8"		3901'		1050 SX			
7 7/8"	5 1/2"		11,632'		500 SX			

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 8-6-91	Date of Test 8-7-91	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 Hrs.	Tubing Pressure 50	Casing Pressure Packer	Choke Size W0
Actual Prod. During Test	Oil - Bbls. 77	Water - Bbls. 99	Gas - MCF 108

** GAS WELL (5 1/2" Csg.) 2 3/8" 11,294 Packer

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 R.C. Houtchens
Printed Name R.C. Houtchens Sr. Production Clerk
Date 9-13-91 Title (915) 683-2277
Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 9 1991

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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 IV for change of operator.