STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT DISTRIBUTION SANTA FE FILE U.E.G.A. LAND OFFICE TRANSPORTER OIL UPERATOR	JUL 1 O. C ARTESIA OIL	CONSERV P. O. BU NTA FE, NE REQUEST FC	DX 2088 W MEXI	CO 87501	N	Form C-10 Revised 10 Formal 06 Page 1	0-01-78
PROMATION OFFICE	AUTHORIZA	TION TO TRANS	PORT OIL	AND NATU	JRAL GAS		-
Operator				·····			
Bass Enterprises Produc	tion Co.			····			
P O Box 2760, Midland,	<u>Texas 797(</u>	02-2760					
Reoson(s) for liling (Check proper box)	Change in Tra			Other (Pleas	e explain)		
Recompletion	011	· · · · · ·	ry Gas	Change O	perator name		
Change in Ownership	Casinghed	ad Gas 🚺 C	ondensate			·	
Operator If change of XXXXXXX give name Perry R. Bass, P O Box 2760, Midland, Texas 79702-2760 and address of previous owner							
II. DESCRIPTION OF WELL AND LI							
Lease Name Dia Eddy Unit	1	Name, Including F			Kind of Lease State, Federal ar Fee	Federal	Lease No. NM 06818
Big Eddy Unit	<u> 10 B</u>	<u>Sig Eddy Stra</u>	<u>awn</u>		I	reactur	
Unit Letter K : 1656.4	9 Feet From Th	• South Li	• and 19]	72.46	Feel From The	West	
Line of Section 19 Townshi	00 C		31 E	, NMPM	5 J.J.		County
			C.1.5				
III. DISIGNATION OF TRANSPOR				Give address i	to which approved copy	y of this form is	to be sent)
The Permian Corporation			P O B	ox 1183.	Houston. Texas	5 77001-11	83
Amo of Authorized Transporter of Casinghead Gas (X) or Dry Gas Amoco Production Company Phillips 66 Natural Gas Company				<i>Cive address i</i>)x 68, Ho enbrook,	bbs, New Mexic Odessa, Texas	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	10 be sent))68 72
If well produces oil or liquide,		Twp. Ros.	ls gas act	uaily connecte	when OC	ctober 17,	1966
give location of tonks.	0 19	<u>205 : 31E</u>		88		anuary 12,	1967
If this production is commingled with the	it from any oth	ner lease or pool,	give comm	ingling order	number: None	Post	<u> ID-3</u>
NOTE: Complete Parts IV and V on	reverse side i	f necessary.				8-	8-86
VI. CERTIFICATE OF COMPLIANCE				OIL C	ONSERVATION (op nome
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.			APPRO	VED	AUG - 8 198	6	. 19
			Original Signed By				
ny knowledge and benef.			BY		Les A. Clen	ents	
			TITLE		Superviser Dis	.triet +	
R. C. Houtchens R.C. Koutcheus			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepens: well, this form must be accompanied by a tabulation of the deviation				
Senior Production Clerk				tests taken on the well in accordance with RULE 111.			
(Tule)				All sections of this form must be filled out completely for allow- able on new and recompleted wells.			
			Fill out only Sections I, II, III, and VI for changes of owner. well name or number, or transporter, or other such change of condition.				
			Separate Forms C-104 must be filed for each pool in multiply completed wells.				
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IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'y.
Designate Type of Completi	on - (X)	1	1		1 }	1		! 	ا 4
		apl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.,	Name of P	roducing Form	nation	Top Oil/Gas Pay			Tubing Depth		
							Depth Casing Shoe		
Perforations									
		TUBING,	CASING, AN	D CEMENTI	NG RECOR	D			
HOLESIZE		SING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	<u></u>								
						. Alerdad	Load must be a	aual to or exce	end top allow

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V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lo able for this depth or be for full 24 hours)

OIL WELL Date First New OIL Hun To Tanks	Date of Test	Producing Mathod (Flow, pump, gas lift, atc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size .	
Actual Prod. During Test	O11-Bbis.	Water+Bbla.	Gas • MCF	

GAS WELL Actual Prod. Teal-NOF/D	Length of Test	Bbls. Continuete/MMCF	Gravity of Condensate	
Teeting Method (pilot, back pr.)	Tubing Pressure (shut-is)	Casing Pressue (Shut-in)	Choke 5130	