	-			
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		NSERVATION COMMISUL JN	Form C-104 Supersedes Old C-104 and C-110	
SANTA FE / REQUEST FOR ALLO		AND	Effective 1-1-65	
	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE				
IRANSPORTER OIL /		RECEI	/ED	
GAS 2	-	RELEI		
OPERATOR /			975	
Operator		DEC 9	9/ 3	
PERRY R. BASS		0. C. L		
Box 2760, M.	ULAND, TEXAS 19701	ARTESIA, OI		
Reason(s) for filing (Check proper box		Other (Please explain)	NSPORTER OF DRY	
New Well	Change in Transporter of:			
	Oil Dry Gas Casinghead Gas Condens	GAS (YATES).		
Change in Ownership			· · · · · · · · · · · · · · · · · · ·	
If change of ownership give name	NONE			
and address of previous owner				
I. DESCRIPTION OF WELL AND	LEASE		Kind of Lease	
Lease Name		e, Including Formation		
BASS STATE COM.	06-5809 / BUR	TON FLAT Markow		
Location	180 Feet From The NORTH Line	LLO Fact From	The WEST	
Unit Letter;	60 Feet From The //OK/H Line	and <u>680</u> Feet Floh	1116	
Line of Section 15 To	winship ZI-S Range 2	27-E, NMPM, E	DDY County	
Line of Section				
I. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	S Address (Give address to which appro	used conv of this form is to be sent)	
Name of Authorized Transporter of O	or Condensate	Address (Give address to which appro	and the second	
Spar Charles 1		Address (Give address to which appro Box 236, MIDLAND)	wed copy of this form is to be sent)	
Name of Authorized Transporter of Co NATURAL GAS PIPELS	VE CO. OF AMERICA	BOX 236, MIDLAND,	TEXAS 14101 NIDE POSWELL, NA 8820	
HARVEY E. YATES C	Unit Sec. Twp. P.ge.	Is gas actually connected?	SLDG, ROSWELL, NM 8820	
If well produces oil or liquids, give location of tanks.	E 15 21-5 27-E		NOVEMBER 17, 1975	
-	ith that from any other lease or pool, g		PC-SII 4-24-75	
If this production is commingied w V. COMPLETION DATA			Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Complet	Oil Well Gas Well	New Well Workover Deepen		
Designate Type of Complet		Total Depth	P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Elevations (DF, AKD, A1, GR, etc.)				
Perforations			Depth Casing Shoe	
		CEMENTING RECORD	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
V. TEST DATA AND REQUEST	FOR ALLOWARIE (Test must be a	fter recovery of total volume of load oi	l and must be equal to or exceed top allou	
OIL WELL	able for this de	pth or be for full 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	sejs, Etutj	
		Casing Pressure	Choke Size	
Length of Test	Tubing Pressure			
the state of the state of the state	Oil-Bbis.	Water-Bbls.	Gas - MCF	
Actual Prod. During Test				
l		۱		
GAS WELL				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
		Casing Pressure	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure			
			ATION COMMISSION	
VI. CERTIFICATE OF COMPLIA	INCE	ABBROVED DEC 10 19	975	
	d semilations of the Oil Conservation	APPROVED DEC 101		
	nd regulations of the Oil Conservation d with and that the information given		Jesset	
I hereby certify that the rules and regulation that the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BYSUPERVISOR, DISTRICT II		
		TITLE		
		This form is to be filed i	n compliance with RULE 1104.	
It to Then the W.		I an an an an an an allowship for a newly drilled or deepened		
(S	It. A. Weithy, N.		If this is a request for anomable to a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-	
DIUISION	DIVISION PRODUCTION CHERIC			
V/0137017	(Title)	able on new and recompleted	wells.	

DECEMBER 8, 1975 (Date)

Fill cut 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.