Appropriate District Office <u>DISTRICT 1</u> P.O. Box 1980, Hobbs, NM 88240	⁷⁵ ner	State of New Mexico Thergy, Minerals and Natural Resource			nt		VED F	orm C-104
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	· OI	L CONSER	U. Hax 2088		[ON	OCT 31	Se	evided 1-1-89 P e instructions Bottom of Page
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 874		Santa Fe, Ne	w Mexico 87.	504-2088			-	
I.	REQUES	T FOR ALLO			-	CI, C. N ^{ARTESIA, C}		
Operator		CHANGE OF	OIL AND N	ATURAL	HIZATIO GAS	N N	ALLIN'S	
BASS ENTERPRI	SES PRODUCTI	ON CO			W	ell API No.		
		the state of the s				30-015-	-21167	
P.O. BOX 2760 Reason(s) for Filing (Check proper box	, MIDLAND, T	<u>EXAS 7</u> 9702	2-2760					
		as is T	0	her (Please ex	plain)			
Recompletion	Oil	ge in Transporter of			•			
Change in Operator	Casinghead Gas							
and address of previous operator					·····	·····		
L DESCRIPTION OF WEL	L AND LEASE							
	Well 1	No. Pool Name, In	cluding Formation					
BASS STATE COM	1	BURTON	FLATS STR	AUN	King	d of Lease Federal or F		Lease No.
Unit Letter E	. 1980						00	<u>i-5809</u>
	;1900	Feet From The	NORTH Lin	and66().	Feet From The	WES	· T
Section 15 Towns	<u>hip 21S</u>	Range 27	F .			roct riom 1 he	<u> </u>	Line
I. DESIGNATION OF TO A	NEBOD	<u> </u>	<u> </u>	MPM,	EDDY			County
II. DESIGNATION OF TRA lame of Authorized Transporter of Oil	MORTER OF	OIL AND NA'	TURAL GAS					
KUCH OTI COMPANY A D			Address (Gin	address to w	hich approve	d copy of this j	form is so be	t sení)
ame of Authorized Transporter of Casil	nghead Gas	or Dry Gas		ロロス しちちと	2 DDCCL	/ CNDTDA-		
NATURAL GAS PIPELINE well produces oil or liquids,						ENRIDGE d copy of this f EXAS 77		
e location of tanks.	1	Twp. R					/001-02	.83
					When	<u> 27/13 77</u>	001 02	
this production is commingled with that	E 15				When	n 7		
this production is commingled with that COMPLETION DATA	from any other lease				Wher	<u>6-2-7</u>		
	from any other lease	21S 27E	YES	er:	Whei	6-2-7	5	
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RUCTIONS: 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.