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STATE OF NEW MEXICO	i i		
ENERGY AND MINERALS DEPARTMENT Q. C. D.			Form C-104 Revised 10-01-78
A: resta. OFF	TION DIVISION	N	Format 08-01-83 Page 1
5ANTA /8 P. O. BO		-	· · ·
SANTA FE, NEV	V MEXICO 87501		
	R ALLOWABLE		
AUTHORIZATION TO TRANSI	ND PORT OIL AND NATUR	AL GAS	
I.			
Bass Enterprises Production Co.			
<u>Address</u>			
P 0 Box 2760, Midland, Texas 79702-2760 Reason(s) for filing (Cases proper box)	Other (Please e	saplain)	
New Well Change in Transporter of:	Change Op	erator name and N	IGPLCA address
	ondensale		
Operator			
If change of ANDAX MAR give name Perry R. Bass, P O Box :	2760, Midland, Te	<u>xaş 79702-2760</u>	
H DECEMPTION OF WELL AND LEASE			
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including F	of marton	Kind of Lease State, Federal or Fee Fe	ederal LC067144
Big Eddy <u>unit</u> 41 Indian Flats	Atoka Gas		
Location J : 1980 Feet From The South Lin	• and <u>1980</u>	Foot From TheEast	-
			County
Line of Section 35 Township 21S Range	<u>28Е, ммрм,</u>	Eddy	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. GAS		in form is in he sent?
Name of Authorized Transporter of Cil or Condensate	Vadiese Lotos pontere to	which approved copy of th	
The Permian Corporation		avatan Tayar //	
The stand Transporter of Casinghead Gas Of UTY USS (A)	Address (Give address io	ouston, Texas 77 which approved copy of th	001-1183
Name of Authorized Transporter of Casinghead Gas or Dry Gas [X] Natural Gas Pipeline Co. of America	Address (Give address 10	uston, Texas 770	001-1183 his form is to be sent)
Natural Gas Pipeline Co. of America	Address (Give address in P 0 Box 283, Ho Is gas actually connected	uston, Texas 770	<u>001-1183</u> form is to be sent; 01-0238
Natural Gas Pipeline Co. of AmericaIf well produces oil or liquide, give location of tents.UnitSec.Twp.Rge.J3521528E	Address (Give address to P O Box 283, Ho Is gas actually connected Yes	uston, <u>Texas</u> 770	001-1183 his form is to be sent)
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IV. COMPLETION DATA

ſ <u></u>		OIL Well	Gas Well	New Well	Workover	Deepen	Plug Buck	Same Restv.	¹ DIII. 8+≠′
Designate Type of Completi	on - (X)	* •	*		•	4	1	1 1	1
Dute Spudded	Date Compl. Heady to Prod.		Total Depili		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oll/Gas Pay		Tubing Dopth				
Perforations						Depth Casing Shoe			
		TUBING, C	ASING, AN	DCEMENTH	IG RECOR)			
HOLESIZE		NG & TUDIN		DEPTH SET		SACKS CEMENT			
	1								
				1			and must be a	and to be ered	ad top allow

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed to able for this depth or be for full 24 hours)

Date Fital New Oll Hun To Tanks	Date of Test	Producing Method (Flow, pur	Producing Method (Flow, pump, gas lift, etc.)		
Longth of Test	Tubing Pressure	Casing Processo	Chicke Size		
Actual Prod. During Test	Oli - Ubia.	Water-Bble.	Gos - MCF		

GAS WELL

Actual Plas. Test-AICF/D	Longth of Tool	Bbis, Cordensore/MMCF	Gravity of Condensate
Teeling Method (pilol, back pr.)	Tubing Pressure (shut-1.8)	Casing Pressue (Hhut-im)	Choke bize

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