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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico ergy, Minerals and Natural Resources Depart

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

DISTRICT II P.O. Drawer DD, Artosia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe. New Mexico 87504-2088

OCT 31 '90

DISTRICT III 1000 Rio Brizos Rd., Aztec, NM 8741	1			-	MCO 0750					\mathcal{V}_{Λ}	
	HEQU							0. C. D		UV	
l.		TO TRAI	1SP	ORT OIL	AND NA	TURAL G		ARTESIA, OF	FICE		
Operator BASS_ENTERPRIS	BASS ENTERPRISES PRODUCTION CO. *						Well API No. 30-015-228				
Address				0700 07	<u> </u>	·····, p		00-010-		<u></u>	
P.O. BOX 2760		, IEXAS	/!	9702-27		(DI	laia)				
Reason(s) for Filing (Check proper box New Well	,	Change in 1	`Iknew	nter of:	L. Oth	or (Please exp	iain)				
Recompletion	Oil		Ory Ga								
Change in Operator	Carlinghea		Conde								
f change of operator give name and address of previous operator											
L. DESCRIPTION OF WEL	LANDIE	A CE		**							
Lease Name		Pool N	ame, Includir	g Formation			Kind of Leave		Lease No.		
BIG EDDY					rs atoka	GAS	Stat	e Federal or l	Fee LC	067144	
Location											
Unit Letter B	: 660	<u>'</u>	Feet Fi	rom The	NORTH LIN	and198	30	Feet From Th	<u>EAST</u>	Lin	
Section 25 Town	ship 21S		Range	28E	, NI	MPM, [DDY			County	
III. DESIGNATION OF TRA				D NATUI							
Name of Authorized Transporter of Oi	or Condens	alo		Address (Giv		• •	ed copy of thi	-			
	KOCH OIL COMPANY, A DIVISION Name of Authorized Transporter of Casinghead Gas			VD. INC					ENRIDGE TX 76024 copy of this form is to be sent)		
NATURAL GAS PIPELINE				Gas X	1	283, HOU			77001-0		
If well produces oil or liquids, give location of tanks.	Unit B	Sec.	Twp. 21S	Rge. 28E	is gas actual	y connected? YES		en 7	7 , 19 80		
If this production is commingled with t		J			,			UULI	7, 190		
IV. COMPLETION DATA		Oil Well		Gas Woll	New Well	Workover	Doeper	Plus Bac	k Same Re	s'v Diff Res'v	
Designate Type of Completi		_i	i_		<u>i</u>						
Date Spudded	pl. Ready to Prod.			Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	roducing Formation			Top Oil/Gas Pay			Tubing Depth				
Perforations		····			l	·		Depth Ca	sing Shoe		
		TURING	CASI	NG AND	CEMENTI	NG RECO	RD				
HOLE SIZE	ISING & TU			CEMENTING RECORD DEPTH SET				SACKS CEMENT			
		ONORTO O TOOM O OFF							Part ID-3		
				· · · · · · · · · · · · · · · · · · ·					11-9-	90.	
									hy WT	PER	
I TOPOT DATE AND DECL	EOT FOR	111000	F. F. V							·	
V. TEST DATA AND REQUE OIL WELL (Test must be after					he soud to o	= avecad ton a	lloumble for	this death or	ha for full 2	f hours l	
Date First New Oil Run To Tank	Date of T		oj ioda	ou una musi		ethod (Flow,			ve jor juli 24	r nows.y	
Length of Test	ressure		-,,-	Casing Pressure			Choke Si	ze			
_											
Actual Prod. During Test	Oil - Bbli	i.			Water - Bbli			Gas- MC	F		
GAS WELL	. <u></u>				· · · · · · · · · · · · · · · · · · ·						
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conde	asate/MMCF		Grivity	of Condensa	le .	
Farrier Market (wheel)	- W.L.	, ,	::\ <u>-</u>		Cacina bee	sure (Shut-in)	 	Choke S	17.A		
Festing Method (pitot, back pr.)	Luoing P	researe (Shut	-ui)		Casing Field						
VL OPERATOR CERTII				NCE			NSFR	OITAV	A DIAI	SION	
I hereby certify that the rules and a Division have been complied with	and that the inf	ormation give		ve			, , , , , , , , l				
is true and complete to the best of	my knowledge	and belief.			Date	e Approv	red	NOV	7 1990)	
L.C. Har	Ale	us.				• •					
Signature R.C. HOUTCHENS	ENIOR PR	ODUCTIO	M CI	EDV	By_		ORIGI	VAL SIGNI	ED BY		
Printed Name		ODUCTIO	Title	_EKK	Title		SUPER	MILLIAM <mark>3</mark> VIS OF , DI	CTOLOT	14	
10-26-90	(915)	683-22	77		11	<i>-</i>			OI KICH	11	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

(91<u>5)</u>

Date

- 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.

Telephone No.

- 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.