Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico iergy, Minerals and Natural Resources Depai

OCT 31 '90

RECLIMED

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

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

P.O. Box 2088 New Mexico 87504-2088

OIL CONSERVATION DIVISION

DISTRICT III		Santa	I re, New Mic	XICO 0/304-20	700		C. C. U.		<i>y</i> ₇ °,	
1000 Rio Brazos Rd., Aztec, NM 87410				LE AND AUT		AHON	artesia, offi	CĒ	\mathcal{O}	
Operator BASS ENTERPRISES	RPRISES PRODUCTION CO.					Well A	PI No. 30-015-23473			
Address		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		<i>c</i> o		`	00-013-23	4/3		
P.O. BOX 2760, N Reason(s) for Filing (Check proper box)	HULAND	, TEXAS	/9/02-2/		ease explai	in)			·	
New Well		Change in Tn	insporter of:		•	•				
Recompletion Change in Operator	Oil Casinghead	_ D ₁	y Gas							
f change of operator give name and address of previous operator			<u> </u>		P		···			
L DESCRIPTION OF WELL	AND LEA	SE				·				
Lease Name	Well No. Pool Name, Including Formation					Kind of Lease Lease No.				
BIG EDDY		70 l		LATS ATOKA			federal or Fee	1,069		
Location B	660	····			1000				£13	
Onit Detter	- :		et From The	Line and	1980		et From The	EAST	Line	
Section 26 Township	, 215	R _i	inge 28E	, NMPM,	EDD	ρΥ			County	
III. DESIGNATION OF TRAN										
KOCH OIL COMPANY, A DI	1 1	OF KOCH	1 7 1	Address (Give add					-	
Name of Authorized Transporter of Casing	head Gas	Of	Dry Gas V	Address (Give add	1338	ich approved	ENRIDGE . copy of this for	n is to be se) <u>24</u> nd)	
NATURAL GAS PIPELINE O			- 	BOX 283,	HOUS	TON , TI	EXAS 770			
If well produces oil or liquids, give location of tanks.	Unit B		мр. Rgc. 21S 28E	is gas actually com YES	nocted?	When	7 2-12-8	32	·	
If this production is commingled with that I	from any other	er lesse or poc	lgnimmoo avig ,k	ing order number;				· · · · · · · · · · · · · · · · · · ·		
		Oil Well	Gas Well	New Well Wo	rkover	Doepen	Plug Back S	amo Res'v	Diff Res'v	
Designate Type of Completion Date Spudded		l. Ready to Pr	<u> </u>	Total Depth			P.B.T.D.		L	
							F.B.1.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations				<u> </u>			Depth Casing	Shoe		
	T	UBING, C	ASING AND	CEMENTING	RECOR	D	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
HOLE SIZE	ING & TUB					SACKS CEMENT				
	<u> </u>	•	·				Post ID-3			
	 						1/-	- 9-90	<u>0</u> 0=0	
								7 201 -		
V. TEST DATA AND REQUES OIL WELL (Test must be after to				h			. 4 4 4	£ 11 0 4 1		
Date First New Oil Run To Tank	Date of Tes		OCCUPANT TO STATE OF THE STATE	be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pres	saure		Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.		***	Water - Bbia.			Gas- MCF			
GAS WELL	<u> </u>		····	<u></u>			1			
Actual Prod. Test - MCF/D	Length of 1	Cest		Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
				THE CONTRACTOR CONTRACTOR						
VL OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				OIL	OIL CONSERVATION DIVISION					
is true and complete to the best of my knowledge and belief.				Date Approved NOV 7 1990						
KIL, HOWCh	eus			11					1	

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

HOUTCHENS, SENIOR PRODUCTION CLERK

Signature R.C.

Date

Printed Name 10-26-90

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

By.

Title

ORIGINAL SIGNED BY

SUPERVISOR DISTRICT II

MIKE WILLIAMS

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Tiue 683-2277

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.