

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-104
Revised 10-01-78
Format 06-01-83
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AUG 25 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
MEXIA, OFFICE

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TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>

I.

Operator Bass Enterprises Production Co. ✓	
Address P.O. 2760, Midland, Texas 79702-2760	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate Change Operator Name

If change of ownership give name and address of previous owner: Operator Perry R. Bass P.O. Box 2760, Midland, Texas 79702-2760

II. DESCRIPTION OF WELL AND LEASE

Lease Name Big Eddy Unit	Well No. 97	Pool Name, Including Formation Quahada Ridge Morrow Gas	Kind of Lease State, Federal or Fee	Lease No. NM067964
Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>35</u> Township <u>21S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Dry	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Natural Gas Pipeline Co. of America	Address (Give address to which approved copy of this form is to be sent) P.O. Box 283, Houston, Texas 77001-0283	
If well produces oil or liquids, give location of tanks.	Unit ---	Sec. ---
	Twp. ---	Rge. ---
Is gas actually connected?	When Yes February 9, 1984 <i>Per 10-3</i>	

If this production is commingled with that from any other lease or pool, give commingling order number: 9-2-88 *ch of name*

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

L.C. Hartman
(Signature)
Sr. Production Clerk
(Title)
August 23, 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 23 1988, 19
BY Original Signed By
Mike Williams
TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened 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 allowable on new and recompleted wells.
Fill out 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 multiple completed wells.