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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | |
|---|---|
| Operator BASS ENTERPRISES PRODUCTION CO. | Well API No. 30-015-27283 |
| Address P O BOX 2760; MIDLAND, TX 79702-2760 (915) 683-2277 | |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Operator <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|-----------------------|
| Lease Name GOLDEN 8 FEDERAL | Well No. 3 | Pool Name, including Formation SOUTH GOLDEN LANE (DELAWARE) | Kind of Lease State, Federal or Fee | Lease No. NM-02946 |
| Location Unit Letter L : 1980 Feet From The SOUTH Line and 990 Feet From The WEST Line Section 8 Township 21S Range 29E, NMPM, EDDY County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|---|-----------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P O BOX 1558; BRECKENRIDGE, TX 76024 | |
| KOCH OIL COMPANY, A DIV OF KOCH IND. INC. | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) 4200 E. SKELLY DR. STE 560; TULSA, OK 74135 | |
| GRAND VALLEY GATHERING COMPANY | | |
| If well produces oil or liquids, give location of tanks. | Unit K | Sec. 8 |
| | Twp. 21S | Rge. 29E |
| | Is gas actually connected? YES | When? 6-4-93 |

If this production is commingled with that from any other lease or pool, give commingling order number: CTB-370

IV. COMPLETION DATA

| | | | | | | | | |
|--|--|--------------------------|--|----------|--------|-----------|------------|------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded 5-16-93 | Date Compl. Ready to Prod. 6-4-93 | Total Depth 4575' | P.B.T.D. 4487' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3391.3' GR | Name of Producing Formation DELAWARE | Top Oil/Gas Pay 4246' | Tubing Depth 4138' | | | | | |
| Performances 4246'-4252' | | | Depth Casing Shoe 4575' | | | | | |

TUBING, CASING AND CEMENTING RECORD

| | | | |
|--------------|----------------------|-----------|-------------------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 14 3/4" | 11 3/4" | 1240' | 750SX CL "C"-CIRCULATED |
| 11" & 7 7/8" | 5 1/2" | 4575' | 1500 SX H.L.-CIRCULATED |

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

| | | | |
|--|------------------------|--|---------------------|
| Date First New Oil Run To Tank 6-4-93 | Date of Test 6-5-93 | Producing Method (Flow, pump, gas lift, etc.) FLOWING | |
| Length of Test 24 | Tubing Pressure 75 | Casing Pressure PACKER | Choke Size 24/64 |
| Actual Prod. During Test | Oil - Bbls. 52 | Water - Bbls. 1 | Gas - MCF 27 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

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

Signature
R.C. HOUTCHENS
Printed Name
JUNE 8, 1993
Date
Telephone No.

SENIOR PRODUCTION CLERK

(915) 683-2277

OIL CONSERVATION DIVISION

Date Approved JUN 22 1993

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: 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.