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

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

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

0.00

	REQUEST	LOU VI	LOTIAL			21101			
	TOTE	RANSP(ORT OIL	AND NAT	URAL GA	S Well Al	71 No.		
Bledsoe Petro Corp					30-015-20095				
ddress 3908 N.Peniel, Su		 Bethanv	r. OK 73	008					
3908 N. Peniel, 50 rason(s) for Filing (Check proper box)	11 te 500, L	Je chany	, 011 13	Othe	r (Please explai	n)			
ew Well	Change	e in Transpo	orter of:			11100			
ecompletion	Oil	Dry Ga	1737	Eff	ective 7/	1/93			
nange in Operator	Casinghead Gas	Conder	neate 🗌						
change of operator give name d address of previous operator									
DESCRIPTION OF WELL	AND LEASE	No. Pool N	łame, Includir	e Formation		Kind o			ise Na
ease Name	1				Morrów) (gas State,	ederal or Fee	91-00	3889
Rock Tank Unit									
ocation	. 660	E. a E	no	orth Line	and 920	Fee	t From The	west	Line
Unit LetterD	- : <u> </u>	real m	rom the						
Section 7 Township	23S	Range	25E	, N	IPM, E	ddy			County
I. DESIGNATION OF TRAN	SPORTER OF	OIL AN	D NATU	RAL GAS	e address to wh	ich approved	copy of this fo	orm is to be se	ਬ)
lame of Authorized Transporter of Oil		ndensate	XX	PO BOX	1183. Ho	rx 7700			
Scurlock Permian	thead Gee] Or Dra	y Gas XX	Address (Giv	e address to wh	ich approved	copy of this fo	orm is to be se	u)
iame of Authorized Transporter of Casing		ן טוטוט	, LAAI	PO BOX	1492, El	Paso,	Texas799	78	
El_Paso Natural Gas	Company	Twp.	Rge	Is gas actuall	y connected?	When	?		
well produces oil or liquids, we location of tanks.	Unit Sec. 7	123S		γ ∈		1_3/2	1/69		
this production is commingled with that i				New Well		Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion		Well	Gas Well	I Mem Men	1	1		l	<u> </u>
Date Spudded	Date Compl. Rea	dy to Prod.		Total Depth		<u> </u>	P.B.T.D.		
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casin	ng Shoe		
			77. AND	CENTENTIA	NG PECOR	חי	<u>-!,</u>		
	TUBING, CASING AND			CEMENTING RECORD			SACKS CEMENT		
	IORI			CLUVILLIVIA	DEDTH SET				
HOLE SIZE	CASING	& TUBING	SIZE	CLIVILIAVIA	DEPTH SET		 		
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	CASING	& TUBING	SIZE		DEPTH SET				ers.)
V. TEST DATA AND REQUE OIL WELL (Test must be after t	CASING ST FOR ALLO recovery of total wo	& TUBING	SIZE	to be equal to o	DEPTH SET	lowable for th	is depth or be		ers.)
V. TEST DATA AND REQUE OIL WELL (Test must be after t	CASING	& TUBING	SIZE	to be equal to o	DEPTH SET	lowable for th	is depth or be		ers.)
V. TEST DATA AND REQUE OIL WELL (Test must be after to Date First New Oil Run To Tank	ST FOR ALLO recovery of total wo Date of Test	& TUBING	SIZE	t be equal to o	r exceed top all	lowable for th	is depth or be	for full 24 hou	os.)
V. TEST DATA AND REQUE OIL WELL (Test must be after to Date First New Oil Run To Tank	CASING ST FOR ALLO recovery of total wo	& TUBING	SIZE	to be equal to o	r exceed top all	lowable for th	is depth or be etc.)	for full 24 hor	es.)
/. TEST DATA AND REQUED IL WELL (Test must be after to Date First New Oil Run To Tank Length of Test	ST FOR ALLO recovery of total vo Date of Test Tubing Pressure	& TUBING	SIZE	t be equal to o	r exceed top all fethod (Flow, p	lowable for th	is depth or be	for full 24 hor	es .)
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V. TEST DATA AND REQUED THE WELL (Test must be after a Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.)	CASING ST FOR ALLO recovery of total vo Date of Test Tubing Pressure Oil - Bbls.	S TUBING OWABLI plume of load	E d oil and mus	t be equal to o Producing N Casing Press Water - Bbi	r exceed top all fethod (Flow, p	owable for th	is depth or be etc.) Choke Size Gas- MCF Gravity of Choke Size	for full 24 hor	•
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- 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.