| | | | | | Barr (101 | |
|---|---|---|---|--|--|--|
| BTATE OF NEW MEXICO HERIGY AND MINERALS DEPARTMENT | | | | | Form C-104 Revised 10-1-78 | |
| | i 01 | LCONSERVA | | ON | | |
| Dist MINUE KOM | | Р. О. ВО | | RECEIVE | DBY | |
| FANTA / B | Ś | SANTA FE, NEW | MEXICO 8710 | 1 | I | |
| | | | | AUG 3 - | 1987 | |
| LAND DEPEK | | REQUEST FOR | ALLOWABLE | | | |
| TRANSPORTER OIL CAS | | 4A | | O. C. | | |
| OPERATOR | AUTHORI | ZATION TO TRANSP | ORT OIL AND NA | URMARTESHA, C | DEFICE | |
| I. PROBATION OFFICE | | | | | | |
| Bledsoe Petro Corporatio | n | | | | | |
| A141000 3908 N | | # 320 BETH | ANY, OR 730 | ංචි | | |
| 4545 First Gity Center | 1700 Pacif | ic Avenue Dall | as, 1X 75201 | | | |
| Reason(s) for filing (Check proper bo | | | Other (Ple | ase explains | | |
| New Well | | Transporter of: Dry Ga | | | | |
| Recompletion | Cil | H | | erator | | |
| Change in Ownership X | Casinghea | | | | | |
| If change of ownership give name and address of previous owner | BHP Petro | <u>leum Company, J</u> | Inc. 6 Desta D | rive Suite | 3200 Midland, TX 79705 | |
| H. DESCRIPTION OF WELL AND | LEASE | Pool Name, Including Fo | | Kind of Leas | e Lease N | |
| Lease Name | Well No. | | | State, Federa | n or Foo Federal NM010095 | |
| Dark Canyon | | Rock Tank - Lo | wei Morrow | <u> </u> | ······································ | |
| Location D | | The North Lin | e and 660 | Feet From | The West | |
| Unit Letter D ; 660 | Feet From | n 1ne Cin | • Give | | <u> </u> | |
| Line of Section 18 T | mahip235 | Range | 25E . NN | IFM. Eddy | Count | |
| | | | | | | |
| II. DESIGNATION OF TRANSPOR | TER OF OIL | AND NATURAL GA | S Address (Give addre | ss to which appro | uved copy of this form is to be sent) | |
| Nome of Authorized Transporter of C | u (L) or Co | ondensola 🔤 | Address (other see | | ton, Texas 77001 | |
| The Permian Corp. | | or Dry Gas x | Address (Give addre | ss to which appro | oved copy of this form is to be sent) | |
| Transwestern Pipelin | | | 1 | | ston, Texas 77001 | |
| | Unit Sec. | Twp. Rge. | is gas actually conr | | | |
| If well produces all or liquids, give location of tanks. | D 1 | | Yes | I | 6-25-75 | |
| If this production is commingled w | with that from any | v other lease or pool, | give commingling o | rder number: | | |
| V. COMPLETION DATA | | | New Well Workov | | Plug Back Same Restv. Dill. Re | |
| Designate Type of Complet | | il Well Gas Well | i i i | | | |
| Designate Type of Compret | Date Compl. R | | Total Depth | | P.B.T.D. | |
| Daie Spuddod | | eday to Prod. | | | | |
| Lievations (DF. RKB, RT. GR. etc.) | Name of Produ | cing Formation | Top Oll/Gas Pay | | Tubing Depth | |
| Lievencas (DF, AKB, A7, GA, etc.) | | - | | | | |
| Perforations | | | | | Depth Casing Shoe | |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| | the second se | UBING, CASING, AN | | | SACKS CEMENT | |
| HOLE SIZE | CASING | & TUBING SIZE | DEPT | HSET | Part ID-3 | |
| | | | <u> </u> | | 8-6-88 | |
| | | | | | the an | |
| | | | | | | |
| | | | the recovery of total | volume of load of | l and must be equal to or exceed top a | |
| TEST DATA AND REQUEST | FOR ALLOHA. | BLE for this di | epth or be for juli 24 r | our I / | | |
| OIL WELL Date First New Cil Run To Tanks | Date of Test | | Producing Method (| rlow, pump, gas : | liji, etc.) | |
| | | | \` | . <u> </u> | Choie Size | |
| Length of Test | Tubing Preser | • لن | Casing Pressure | · | | |
| | | | Water-Bbla. | | Gas - MCF | |
| Actual Prod. During Test | Cii-Btis. | | Wdist- Dbis. | | | |
| | | | | | | |
| | | | | | · · · · · · · · · · · · · · · · · · · | |
| GAS WELL Actual Fred. Test-MCF/D | Longth of Tee | | Bbls. Condensate/ | MMCF | Gravity of Condeneate | |
| Actual Fred. 1001-ACT7D | | | | | | |
| Teeting Wethod (pilot, back pr.) | Tubing fires | w. (Shut-in) | Cosing Freesure (1 | (hat-in) | Chore Size | |
| | | | | | | |
| L CERTIFICATE OF COMPLIA | NCE | | 0 | L CONSERVA | TION DIVISION | |
| 1. CLAIMICATE OF COMPENSION | | | | AUG | 1 1988 19 | |
| I hereby certify that the rules an | d regulations of | the Oil Conservation | APPROVED_ | | | |
| I hereby certify that the fulled with and that the information given Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | DYOriginal Signed By Mike Williams | | | |
| above is true and complete to t | | - | Н | Mike | VVIIIIditis | |
| | | | TITLE | | compliance with BULE 1104. | |
| | | This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or despend if this is a request for sllowable for a headletion of the deviation | | | | |
| 1 D ^(Signiniwa) | | | | | | |
| | | | well, this form must be accompanies with NULK 111. Insta islem on the well in accordance with NULK 111. All sections of this form must be filled out completely for allo- | | | |
| V.1 · | <u></u> | | M | anar futritiāni.₽Va ' | | |
| $\gamma/2$ | $\frac{(T_{11}(t_{0}))}{(T_{01}(t_{0}))}$ | | | able on new and recompleted wells. Fill out only Sections I, II, III, and VI for thangan of owned well name or number, or transporter, or other such change of conditions well name or number, or transporter, or other such change of conditions well name or number. | | |
| | Unia) 1007 | | 11 11 | \$ 8 8 6 7 0 7 . \$ 17 . \$ 7 0 7 - 0 7 . | | |
| Effective Date of Jun | e 1, 1987 | | Severate 1 | onus C+104 un - | at he filled for such post in mul | |