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

State of New Mexico lergy, Minerals and Natural Resources Depar

RECEIVED

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

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

OCT 31 '90

| DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 | Santa Fe, New Mexico 87504-2088 0ET 31 '90 | | | | | | | | | |
|--|---|-----------------|---------------------------------|---------------------------|---|--------------|----------------------------|-------------|------------|--|
| I. | | | ALLOWAE | | | | ا .0 ين | O | UP | |
| TO TRANSPORT OIL AND NATURAL GAS Operator BASS ENTERPRISES PRODUCTION CO. 30-015-22945 | | | | | | | | | | |
| Address | | | | | ************************************* | | 30-013-7 | | | |
| P.O. BOX 2760, Reason(s) for Filing (Check proper box) | MIDLAND | , IEXAS | 79702-27 | | et (Please expl | lain) | | | | |
| New Well Recompletion | Oil | Change in Tr | nansporter of: | | (* | | | | | |
| Change in Operator | Casinghead | | ondensate 🔀 | | | | | | | |
| If change of operator give name and address of previous operator | | | | | | | | | | |
| II. DESCRIPTION OF WELL | AND LEA | ASE | | | | | | | | |
| Lease Name BIG EDDY UNIT | | | ool Name, Includi INDIAN FLA | | GAS | | of Lease Federal or Fee | | ease No. | |
| Location | | | | | OW 300111 | WES | | LCU6 | 9140A | |
| Unit LetterK | _ : <u>1980</u> |)· Fe | eet From The Wi | EST Lin | e and | 0 Pe | et From The _ | SOUTH | Line | |
| Section 9 Township | 22 S | R | ange 28E | , N | мрм, | EDDY | | | County | |
| III. DESIGNATION OF TRAN | SPORTE! | R OF OIL | AND NATU | RAL GAS | | | | | | |
| Name of Authorized Transporter of Oil KOCH OIL COMPANY, A DI | Address (Give address to which approved copy of this form is to be sent) | | | | | | | | | |
| Name of Authorized Transporter of Casing | P.O. BOX 1558. BRECKENRIDGE. TX 76024 Address (Give address to which approved copy of this form is to be sent) | | | | |)24 nı) | | | | |
| NATURAL GAS PIPELINE (If well produces oil or liquids, | | | | BOX 2 | 283, HOUS | STON , T | EXAS 77 | 001-0283 | | |
| give location of tanks. | <u>i k</u> i | 9[| wp. Rgc. 22S 28F | | y connected? YFS | When | | 9, 1980 | | |
| If this production is commingled with that IV. COMPLETION DATA | from any oth | er lease or poo | ol, give comming! | ing order num | ber: | | | | | |
| | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v | |
| Designate Type of Completion Date Spudded | | ol. Ready to Pr | nod. | Total Depth | 1 | <u> </u> | P.B.T.D. | | <u>i</u> | |
| Elevations (DE DVD DT CD) | | | | | | | r.b.1.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | | Top Oil/Gas | ray | | Tubing Depth | | | |
| Perforations | | | | | | | Depth Casing | g Shoe | | |
| | T | UBING, C | ASING AND | CEMENTI | NG RECOR | മ | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | | DEPTH SET | | | SACKS CEMENT | | | |
| | | | | | | | 11-9-90 | | | |
| | | | | | | | chy LT: PER | | | |
| V. TEST DATA AND REQUES OIL WELL (Test must be after to | | | | 1 | | | .1 | | | |
| The state of the s | | | | | 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 | 20.11 | | | | | | Choke Size | | ^ | |
| | Tubing Pressure | | | Casing Press | ire | | CHOKE SIZE | | | |
| Actual Prod. During Test | Oil - Bbls. | | | Water - Bbis. | | | Gas- MCF | | | |
| GAS WELL | 1 | | | l | | | | | | |
| Actual Prod. Test - MCF/D | Length of | Cel | | Bbls, Condensate/MMCP | | | Gravity of Condensate | | | |
| Festing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | | | Casing Pressure (Shut-in) | | | Choke Size | | | |
| VI ODED ATOD CEDITION | | <u> </u> | | | | | | | | |
| VI. OPERATOR CERTIFIC I hereby certify that the rules and regula | | | | (| DIL CON | NSERV | ATION I | DIVISIC | N | |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | | _ | | | NOV 7 4000 | | | |
| 10 11 11 | | | | Date Approved | | | NOV 7 1990 | | | |
| Signature Signature | | | | | By ORIGINAL SIGNED BY | | | | | |
| R.C. HOUTCHENS, SENIOR PRODUCTION CLERK | | | | | MIKE WILLIAMS Title SUPERVISOR, DISTRICT IT | | | | | |
| Printed Name 10-26-90 | (915) | 683-2277 | | Title | S | UPERVISE | R, DISTRI | V 1 · 11 | | |
| Date | | Telepho | one No. | 1 | | | | | | |

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.