NO. OF COPIES RECEIVED	REQUEST I	DISERVATION COMMISSION	Form C=104 Supersedes Old C=105 and C=11- Effective 1=1-65
U.S.G.S. LAND OFFICE	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL	
GAS V	-		AUG 24 1983
PROBATION OFFICE			O. C. D.
Operator Belco Devel	opment Corporation		ARTESIA, OFFICE
Audress	Katy Rd. Ste. 100 Houstor	Texas 77055	
Reason(s) for filing (Check proper bo		Other (Please explain)	
New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas Conden	F1	
If change of ownership give name and address of previous owner	Belco Petroleum Corpon	ration 10,000 Old Katy	Rd. Ste. 100 Houston, TX 77055
DESCRIPTION OF WELL AND	Vell No. Pool Name, Including Fo	rmation Kind of Lee	ase Lease No.
Cavalier	1 Loving, North	(Morrow) State, Fede	eral or Feo Fee
	310 South	1650	m The East
Unit Letter;;	23-5		Eddy County
Line of Section 1			
Name of Authorized Transporter of C		Address (Give address to which app	proved copy of this form is to be sent;
Nome of Authorized Transporter of C El Paso Natural Gas		Address (Give address to which app P. O. Box 1492, El Pas	proved copy of this form is to be sent) 50, TX, 79978
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected?	When
give location of tanks.		Yes	1-12-82
If this production is commingled v . <u>COMPLETION DATA</u>	vith that from any other lease or pool,	Now Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Complet		New Well Wolkovel Docpen	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations		<u> </u>	Depth Casing Shoe
	TURING CASING AND	CEMENTING RECORD	
HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours)	oil and must be equal to or exceed top allows
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump. gas	lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod; During Test	Oti - Bbis.	Water-Bbls.	Gas-MCF
l		<u> </u>	- ORANA
GAS WELL			<u> </u>
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condenacta
Testing Method (pitot, back pr.)	Tubing Process (Shuu-iu)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COMPLIA	NCE	OIL CONSER	VATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation		APPROVED AUG 2 5 1983	
		CONCINAL SIGNED	
above is true and complete to the best of my knowledge and belief.		BY BY LARRY DISUNS	
$\sim \rho \rho$			in compliance with RULE 1104.
To Ann Randal JO ANN RANDALL		I an all the second set for all	towable for a newly dillied or deepened
(Signature)		well, this form must be account tests taken on the well in ac	cordunce with RULE 111.
Production Accountant		All sections of this form eble on new and recompleted	must be filled out completely for sllov-
August 15, 1983		THU out only Continue I	IT Iff. and VI for champen of owner,
	(Dute)	well name or number, or tranat	porter, or other such thange of condition.

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