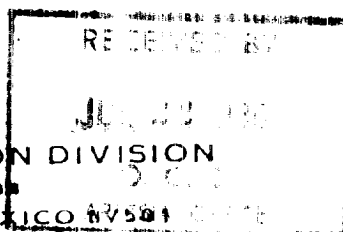


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501



Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Bass Enterprises Production Co.
Address: P O Box 2760, Midland, Texas 79702-2760
Reason(s) for filing (Check proper box):
☐ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas
☐ Recompletion ☐ Casinghead Gas ☐ Condensate
☐ Change in Ownership
Other (Please explain): Change Operator name

If change of Operator, give name and address of previous owner: Perry R. Bass, P O Box 2760, Midland, Texas 79702-2760

II. DESCRIPTION OF WELL AND LEASE

Lease Name Big Eddy Unit	Well No. 82	Pool Name, including Formation Indian Flats Morrow Southwest	Gas Kind of Lease State, Federal or Foreign Federal	Lease No. LC069142A
Location Unit Letter I : 760 Feet From The East Line and 1980 Feet From The South Line of Section 10 Township 22S Range 28E NMPM Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P O Box 1183, Houston, Texas 77001-1183
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Natural Gas Pipeline Co. of America	Address (Give address to which approved copy of this form is to be sent) P O Box 283, Houston, Texas 77001-0238
If well produces oil or liquids, give location of tanks: Unit I Sec. 10 Twp. 22S Rge. 28E	Is gas actually connected? Yes When December 23, 1981

If this production is commingled with that from any other lease or pool, give commingling order number: Part ID-3 8-8-86 Chs Op name

NOTE: Complete Parts IV and V on reverse side if necessary.

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

R. C. Houtchens *R.C. Houtchens*
(Signature)
Senior Production Clerk
(Title)
July 21, 1986
(Date)

OIL CONSERVATION DIVISION
AUG - 7 1986

APPROVED _____, 19____
BY _____ Original Signed By
Les A. Clements
TITLE _____ Supervisor District II

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'y.	Diff. Res'y.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.H.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks		Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF	

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