

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240  
  
DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210  
  
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department  
  
OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED  
MAY - 2 1991  
  
O. C. D.  
ARTESIA, OFFICE

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

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DP

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Bird Creek Resources, Inc. Well API No. 30-015-23910  
Address 810 S. Cincinnati, Suite 110 Tulsa, OK 74119  
Reason(s) for Filing (Check proper box) ☒ New Well ☐ Recompletion ☐ Change in Operator ☐ Change in Transporter of: ☐ Oil ☐ Casinghead Gas ☐ Dry Gas ☐ Condensate ☐ Other (Please explain) CASINGHEAD GAS MUST NOT BE FLARED AFTER 7/16/91 UNLESS AN EXCEPTION TO: RULE 005 IS OBTAINED  
If change of operator give name and address of previous operator \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Ogden Well No. 1 Pool Name, Including Formation Undesignated Delaware Kind of Lease State, Federal or Fee Lease No. Fee  
Location Unit Letter A : 430 Feet From The North Line and 550 Feet From The East Line  
Section 7 Township 24-S Range 28-E , NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☐ Enron Oil Trading & Transportation Co. Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188 Houston, TX 75251-1188  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent) \_\_\_\_\_  
If well produces oil or liquids, give location of tanks. Unit A Sec. 7 Twp. 24S Rge. 28E Is gas actually connected? No, well SI When ? Waiting on gas connection  
If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

IV. COMPLETION DATA  
Designate Type of Completion - (X) ☒ Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v ☐ Diff Res'v ☒ reentry  
Date Spudded 1-11-91 Date Compl. Ready to Prod. 1-28-91 Total Depth 6000' P.B.T.D. 5934'  
Elevations (DF, RKB, RT, GR, etc.) 3064' GR Name of Producing Formation Delaware Top Oil/Gas Pay 5721' Tubing Depth 5629'  
Perforations 5721-5881' Depth Casing Shoe 6000'  
TUBING, CASING AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
7 7/8" 13 3/8" 0-415' Post ID-2 cmt. circulated  
8 5/8" 8 5/8" 0-2403' 5-12-91 cmt. circulated  
5 1/2" 5 1/2" 0-6000' comp & BK 1125sxs., IOC @ 1850'

V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL (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 Tank 1-28-91 Date of Test 4-4-91 Producing Method (Flow, pump, gas lift, etc.) Pumping  
Length of Test 24 Tubing Pressure -- Casing Pressure -- Choke Size --  
Actual Prod. During Test Oil - Bbls. 18 Water - Bbls. 116 Gas- MCF 14

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 ---

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.  
Bill M. Burks Agent  
Printed Name 4-26-91 Title 918-582-3855  
Date Telephone No.

OIL CONSERVATION DIVISION  
Date Approved MAY 1 6 1991  
By ORIGINAL SIGNED BY MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

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.