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	STATE OF NEW MEXICO			Form C-104
	URGY AND MINERALS DEPARTMENT	OIL CONSERV.	ATION DIVISION	Revised 10-1-78
	Custminution		<b>DX 2088</b>	
	RECEIVED BYNTATE, NEW MEXICO 87501			
	U & U & A			
	APR 1 1985 REQUEST FOR ALLOWABLE			
	AND OF CHANGE OF CONTRANSPORT OIL AND NATURAL GAS			
1.	PROBATION OFFICE			
	Belco Development Corporation			
	Address			
	10,000 Old Katy Rd; Ste 100; Houston, TX 77055			
	Reason(s) for filing (Check proper box) New Well X Change in Transporter of:			
	Recompletion	Oil Dry G	••	
	Change in Ownership	Casinghead Gas Conde		
	If change of ownership give name			
	and address of previous owner			
:1.	DESCRIPTION OF WELL AND	LEASE   Well No.   Pool Name, Including F	ormation Kind of Lease	
	James Ranch Unit	15 Los Medanos (1		lor Foo Federal NM-028
	Location Bottom Hole Locat	ion		///
	Unit Letter 0 ; 791 Feet From The South Line and 1924 Feet From The East			
	Line of Section 7 To	mahip 23–S Range	31-E , NMPM, Eddy Co	. Coun:
•	DESIGNATION OF TRANSPORT		AS Address (Give address to which approv	ed copy of this form is to be sent)
	Name of Authorized Transporter of Cas		Address (Give address to which approv	
	Natural Gas Pipeline of	Unit Sec. Twp. Rge.	P.O. Box 283, Houston T Is gas actually connected?	
	give location of tanks,		No Vas	<del>st: 4 10 85</del>
	If this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number:	
••	Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Restv. Diff. Re
	Date Spudded	Date Compl. Ready to Prod.	Total Depth MD 15000	
	4-10-84	10-11-84	· MD 15090	P.B.T.D. MD 14,990 TVD 14,594
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 14, 486	Tubing Depth
	KB 3339 Perforations	Morrow	14,378-	14,430 Depth Casing Shoe
	14,486-92, 14,510-24, 14,530-38, 14,533-76			15,090
			D CEMENTING RECORD	
	HOLE SIZE	20	610	SACKS CEMENT
	17 <sup>1</sup> 5	13 3/8	4012	3550
	9 7/8	7 5/8	12265 2 <sup>77</sup> 8 14.430	943
	Liner 5" 11, 811 15,090 430 sx 238 14,430 EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exce		I must be equal to or exceed top of	
	OIL WELL Date First New Oil Run To Tarks	able for this de	isth or be for full 24 hours)	
	Date First New OII High 10 Tanks	Date of Test	Preaucing Method (Flow, pump, gas life	(, «(C.)
İ	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
-	Actual Pred. During Test	Oil-Bble.	Water-Bbls.	Gas-MCF
	GAS WELL			
Ī	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
	1260 (ADF 4876)	24 hrs	0	
	Orfice Meter	Tubing Pressure (shnt-in) 5000	Cooling Pressure (Shut-in)	Choke Size 12/64
יד 1. (	CERTIFICATE OF COMPLIANC		OIL CONSERVAT	
	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.		APR 2.3 1985	
			BYOriginal Signed By Mike Williams TITLEOil & Gas Inspector	
	A. a. m. 7/		This form is to be filed in compliance with RULE 1104.	
-	Cliff MIL Galaly		If this is a request for allowable for a newly drilled or deeps well, this form must be accompanied by a tabulation of the devia tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for al- able on new and recompleted wells.	
	Production Superintendent			
	(Title)			
March 29, 1985		Fill out only Sections 1, 11, 111, end VI for changes of ow- well name or number, or transporter, or other such change of condit Separate Forms C-104 must be flied for each pool in mult		