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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
 REQUEST FOR ALLOWABLE  
 AND  
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED

Form C-104  
 Supersedes Old C-104 and C-11  
 Effective 1-1-65

JUN 08 1981

O. C. D.  
 ARTESIA, OFFICE

I

Operator PERRY R. BASS

Address Box 2760, MIDLAND, TX 79702

Reason(s) for filing (Check proper box)

New Well  Change in Transporter of: Oil  Dry Gas

Recompletion  Castinghead Gas  Condensate

Change in Ownership

Other (Please explain) \_\_\_\_\_

If change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name POKER LAKE UNIT NM-02860 Lease No. 49 Well No. WILDCAT Pool Name, including Formation MORROW Kind of Lease \_\_\_\_\_

Location \_\_\_\_\_ State, Federal or Fee \_\_\_\_\_

Unit Letter E : 1980 Feet From The NORTH Line and 990 Feet From The WEST

Line of Section 17 Township 24S Range 30E NMPM, EDDY County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil  or Condensate  NONE Address (Give address to which approved copy of this form is to be sent) \_\_\_\_\_

Name of Authorized Transporter of Castinghead Gas  or Dry Gas  NATURAL GAS PIPELINE CO. OF AMERICA Address (Give address to which approved copy of this form is to be sent) Box 236, MIDLAND, TX 79702

If well produces oil or liquids, give location of tanks. Unit NONE Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ Rge. \_\_\_\_\_ Is gas actually connected? Yes When 12-8-81

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded <u>DEC. 17, 1980</u>	Date Compl. Ready to Prod. <u>MAY 5, 1981</u>	Total Depth <u>14,470'</u>		P.B.T.D. <u>14,435'</u>				
Elevations (DF, RKB, RT, GR, etc.) <u>3448' GL 3270' KB</u>	Name of Producing Formation <u>MORROW</u>	Top Oil/Gas Pay <u>14,307'</u>		Tubing Depth <u>13,813'</u>				
Perforations <u>14,307' - 14,349', ELEVEN SHOTS - SSB-II CHARGES.</u>				Depth Casing Shoe <u>14,470'</u>				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
<u>17 1/2"</u>	<u>13 3/8"</u>	<u>857'</u>		<u>550 "LITE" &amp; 200 "C"</u>				
<u>12 1/4"</u>	<u>9 5/8"</u>	<u>3671'</u>		<u>4600 "LITE" &amp; 200 "C"</u>				
<u>8 3/4"</u>	<u>7"</u>	<u>11522'</u>		<u>975 "H"</u>				
<u>6 1/4"</u>	<u>5" LINER</u>	<u>14470'</u>		<u>360 "H"</u>				

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 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 <u>166 CAOF 1,671</u>	Length of Test <u>4 Hrs</u>	Bble. Condensate/MMCF <u>NONE</u>	Gravity of Condensate _____
Testing Method (pitor, back pr.) <u>BACK PRESSURE</u>	Tubing Pressure <u>2650</u>	Casing Pressure <u>PACKER</u>	Choke Size <u>VARIOUS</u>

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

H. F. West, Jr.  
 (Signature)  
Senior Production Clerk  
 (Title)  
June 3, 1981  
 (Date)

OIL CONSERVATION COMMISSION  
 APPROVED DEC 11 1981  
 BY W. A. Gessert  
 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 deviation 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 multiv...