



JAN 31 1995
State of New Mexico

birkt II		•		Energy, Minerale & Natural Resources Ministructions on back										
O Drawer DD, Istifet III	Artesla, NM	88111-0719	OI	OIL CONSERVATION DIVISION DIST. 2 Submit to Appropriate I										
000 Rio Brazos	Santa Fe	5 BOX 20 5, NM 8	088 1504	-2088				5 Coples						
birici IV O Box 2088, Si	inta Fe, NAI	87504-2088							□ v	MENDED REPORT				
•			I' FOR AL	LOWABL	E AND	ΛU	THORE	ZATI	ON TO TR	ANSPOI	RT .			
Operator name and Address							(			OGRID Number				
Bass Enterprises Production Co.									001801					
P 0 Box 2760				60						Resear for Filing Code CO Eff. 2-1-95				
	Midland, Tx 79702-2760							Name .			Ox Pool Cade			
30 - 0	15-2753		<u>Poker</u>	Lake - De					36647.7		0647			
Froperty Code			Dalass	Prope					9 Well Number					
001786 Poker Lake Unit (Lc-061705-B) 78  II. Surface Location									/8					
Ul er loi no.	Section	Township		Loi.lda .	Feel from th	•	North/Bou	ih Lise	Feet from the	East/West I	ine   County			
А	25	24	S 30E	,	660	North			660					
	Bottom 1			L	000	<del></del>	1 1101	LII	. 000	Lasi	t Eddy			
UL or lot no.	Section	Township		Lot Ida	Feet from the	h e	North/80	sih Ene	Feet from the	East/West	ine County			
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11 Lae Code	13 Product	ng Method (	Code 14 Gas (	Connection Date	" C-12	9 l'erm	lt Number	1	C-129 Elfeetive I	)ate	17 C-129 Expiration Date			
F		P			J			<u> </u>		<u> </u>				
II. Oil a			TICIS  Transporter N		<u> </u>	" FO	<u> </u>	# 0/G	1	1 FOD ULSI	**			
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037480	E.(	).Т.Т. ) Вох 4	Energy Pi	peline Co	o. 28	0666	5	0	ļ					
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L			A-Section	25, 24S										
	Comple	tion Da	la							•	•			
11 Spud Date		14 Ready Date		•	מד י	•		M PBID		1º Perforations				
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VI, Wel	l Test D	ala .	<u> </u>				·							
	New Oll		Delivery Data	H Te	at Date	1.	" Test La	agth	# 1bg. 1	Tenaura	W Cog. Pressure			
<b></b>	~~~	_												
" Ch	oke Size	1	4 Off	44 1	Valer		4 G.	4	" A	OF	" Test Method			
4 I hereby es	estify that the	rules of the	Oil Consensation	Division 5										
4 I hereby certify that the rules of the Oil Conservation Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.							OIL CONSERVATION DIVISION							
Signature:							OIL CONSERVATION DIVISION ORIGINAL SIGNED BY THE V. COM Approved by:							
Printed name	v www	Luung	<del></del>	Approved by: DISTRICT R SUPERVISOR Title:										
Titlet	<u>ıtchenş</u>													
S	roduct	ion Clerk		Approval Date: FEB 1 3 1994										
1 -	30-95			<u>915) 683</u> .	-2277									
" II this is	· crange of	perator fill	In the OGRID n	umber and nam	e of the prev	ous op	CIRIUF							
1	Prevlou	s Operator 5	Signature		······································				. <u> </u>					
Frevious Operator Signature							Printed Name Title Date							

				and the second s
THIS MENDI	18 AN AMENDED REPORT, CHECK THE BOX LABLED REPORT* AT THE TOP OF THIS DOCUMENT		22.	The ULSTR location of this POD if it is different from the well completion location and a chort description of the POD
	gas volumes at 15,025 PSIA at 60°. oil volumes to the nearest whole barrel.	2	23,	The POD number of the storage from which water is moved
compa	for allowable for a newly drilled or deepened well must be nied by a tabulation of the deviation tests conducted in ce with Rule 111.			from this property. If this is a new well or recompletion and this POD has no number the district office will seeign a number and write it here.
l sectio	ne of this form must be filled out for allowable requests on recompleted wells.		24.	The ULSTR location of this POD If it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)
angee	nly sections t, II, III, IV, and the operator certifications for of operator, property name, well number, transporter, or otherwise.	:	26.	MO/DA/YR drilling commenced
	ate C-104 must be filled for each pool in a multiple	:	26.	MO/DA/YR this completion was ready to produce
mpleti	on.	. ;	27,	Total vertical depth of the well
eratori	ly filled out or incomplete forms may be returned to		28. ՝	Plugback vertical depth
,	Operator's name and address		29.	Top and bottom perforation in this completion or casing slice and TD if openhols
	Operator's OGRID number. If you do not have one it will		30.	Inside diameter of the well bore
:	be sesigned and filled in by the District office.		31.	Outside diameter of the casing and tubing
•	Reason for filling code from the following table:  NW New Well  RC Recompletion	:	32.	Depth of casing and tubing. If a casing liner show top and bottom.
	CH Change of Operator AD Add oil/condensate transporter		33.	•
	CO Change oil/condensate transporter AG Add gas transporter		-	Number of eacks of cament used per casing string
	CG Change gas transporter RT Request for test allowable (include volume)		cond	following test data is for an oil wall it must be from a test uoted only after the total volume of load oil is recovered.
	requested) If for any other reason write that reason in this box.		34.	MO/DA/YR that new oil was first produced
	The API number of this well	:	35.	MO/DA/YR that gae was first produced into a pipsline
	The name of the pool for this completion		36.	MO/DA/YR that the following test was completed
• :	The pool code for this pool	: .	37.	Length in hours of the test
•	The property code for this completion		38.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
•	The property name (well name) for this completion		39.	
•	The well number for this completion		40.	Shut-in casing pressure - gas walls  Dismeter of the choke used in the test
0,	The surface location of this completion NOTE: If the United States government survey designates a Lot Number		41.	
	for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.		42.	Barrels of oil produced during the test
1.	The bottom hole location of this completion		43.	Barrels of water produced during the test
2.	Lease code from the following table:		44.	MCF of gas produced during the test
,	F Federal 8 State	i.	48.	Gas well calculated absolute open flow in MCF/D
	P Foe J Jicarilla		70.	The method used to test the well:  F Flowing P Purpolar
	N Navajo U Ute Mountain Ute Other Indian Tribe			P Pumping S Swabbing If other method please write it in.
3.	The producing method code from the following table:	.1	46.	The eignature, printed name, and title of the person
	F Flowing P Pumping or other artificial lift			authorized to make this report, the date this report was signed, and the telephone number to call for questions shout this report
4.	MO/DA/YR that this completion was first connected to a gas transporter		47.	The previous operator's name, the signature, printed name, and title of the previous operator's representative
<b>5.</b>	The permit number from the Dietrict approved C-129 for this completion			authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person
ø. ·	MO/DA/YR of the C-129 approval for this completion		• •	organism by that person
7. <sup>6</sup> ~~	MO/DA/YR of the expiration of C-129 approval for this			
8.	The gas or oil transporter's OGRID number		1	The same and the same of the s
9,	Name and address of the transporter of the product	· •	. :	
0.	The number assigned to the POD from which this product	\$	1	
\$1000	will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.	•	1	and the second s
21.	Product code from the following table:			
14 (44) 14 (4)	O OII - COMPANDE CONTROL OF CO			
	Service Harman Control of the William	And the second	1	AND SHAFT SHEET STORY OF THE SHEET S