		L	:01	IFI	D	ENTL	AL		015 T	
District 1 FO Bax 1980, Hobbs, NM District 11		Sta	ite of N	any Ma				Form C-104		
10 Drawer DD, Aitesla, M District III	Ċ		SERVA	TION	DIVISION	Subr	Revised February 10, 1994 Instructions on back			
1000 Rio Brazos Rd., Azie District IV			PO Bo Fe, NM	x 2088		Submit to Appropriate District Office 5 Copies				
FO Box 2088, Santa Fe, N		IENDED REPORT								
1. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT										
Bass Ente P.O. Box	Product	ion Co.	11	RECED		D 001801		uber		
Midland,	02-2760	s					⁸ Resson for Filing Code			
⁴ API Number 30 - 0 15 07000						<u>l:64</u>	15.4 NW * Pool Code			
30 - 0 15-27962 Troperty Code		Poke	Poker Lake (Delaw			SW C.C.	96047		6047	
001786 11. ¹⁰ Surface	Poke	Poker Lake Unit (N				OFFICE	* Well Number 98			
U er loi Bo, Section	Township	Range	Lot.Ida	Feet fro	m the	North/South Line	Feet from the			
27 30	245	31E		1980		North	660	East/West Has		
UL or lot no. Section	Hole Loc	Renge					000	West	Eddy	
		Keage	Lot Id n	Foet fre	on the	North/South Has	Feet from the	East/West line	County	
¹¹ Lae Code ¹¹ Produc F P	ing Method Co	de ¹⁴ Gas N/	Connection D	1	C-129 Ferm	la Number 1	C-129 Effective 1	Date If C	-129 Expiration Date	
III. Oil and Gas		lers		.P	·····	 				
OGRID		Transporter I and Addres	1 anse 0		" POD " 0/0		B POD ULBIR Location and Description			
	0.T.T. E	1666		P	2813167 p			and tractify		
HO	ouston,	<u> x. 772 </u>								
20809 51 20 Ft	d Richar 2 Main S . Worth.	rdson Ga St. Ste.	soline (3000 102	Co. 2	2813168	8 G				
		1. 70	102							
Search and the second second					******					
V Brochussel IV						ter st. Cerècle				
V. Produced Wa					H POD UI	SIR Location and D				
2813169	Sec	<u>tion 30</u>	<u>, 24S, 3</u>	1 <u></u>		and the solution and the	recription			
Bpud Date	Well Completion Data ¹¹ ¹² ¹³ ¹⁴ ¹⁴ ¹⁴ ¹⁴ ¹⁴ ¹⁴ ¹⁴ ¹⁴			²⁷ 1D			·····			
8-8-94 Hole Size		9-26-94			8200'	8	н гвтр 116'		"Perforations 7983-8001 '	
14 3/4"			aslug & Tuble	g Slee		u Depik Set			¹ Sacks Cement	
]]"			<u> </u>			730'		Circ 413 sx PSL & CL		
7 7/8"			5 1/2"			41 <u>6</u> 9 ' 8200 '				
5 1/2" csg /I. Well Test Data		2	2 7/8" tbg			7657'	3823-860 sx PSL & CL 'H"			
Date New Oll		lvery Date	H Te	el Date			Seating Nipple			
9-28-94	ASAP		9-29		⁷⁷ Test Length 24 hrs		100		" Cag. Pressure	
" Choke Size	" (86	UU .		Waler		# GM	400 **	,	Test Mitthod	
* I hereby certify that the rul with and that the information knowledge and belief.	onservation Di-	274 ervation Division have been complied			150		Р			
knowledge and belief. Bignature:	$n_{\rm L}/c$	A	new wo und beat	of my			SERVATI	ON DIVIS	ION	
Printed name:					Approved by: SUPERVISOR, DISTRICT II					
R.C. Houtchens Tille: Senior Production Clerk										
10-6-94	Phone: (9]	hone: (915)683-2277			Approval Date: OCT 1 4 1994					
" If this is a change of open	ntor fill in the	OGRID num	ber and name	of the prev	ous operat	u r				
	perator Signat				-	J Name				
						- , 1 m LL U		Tide	Date	

COMFIDENTIAL

New Mexico Oil Conservation Division C-104 Instructions

IF THIS I	S AN AMENDED REPORT, CHECK THE BOX LABLED D REPORT" AT THE TOP OF THIS DOCUMENT	22.	T: • ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.)		
Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.			The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will easign a		
accompar	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.	24.	number and write it hare. The ULATE location of this POD if it is different from the		
new and	ne of this form must be filled out for allowable requests on recompleted wells.		Well completion location and a short description of the POD [Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.]		
Fill out o	nly sections i, ii, iii, iV, and the operator certifications for of operator, property name, well number, transporter, or	25.	MO/DA/YR drilling commenced		
other euc	ch changes.	26,	MO/DA/YR this completion was ready to produce		
A separ completi	ate C-104 muet be filed for each pool in a multiple on.	27.	Total vertical depth of the well		
Improperly filled out or incomplete forms may be returned to		28.	Plugback vertical depth		
operators unapproved.			Top and bottom perforation in this completion or casing shoe and TD if openhole		
1.	Operator's name and address	30.	Inside diameter of the well bore		
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	31.	Outside diameter of the casing and tubing		
3.	Reason for filing 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	33.	Number of eacks of cement used per casing string		
	CO Change oil/condensate transporter AG Add gas transporter	The fo	bliowing test data is for an oil well it must be from a test ated only after the total volume of load oil is recovered.		
	CG Change gas transporter RT Request for test allowable (Include volume	34.	MO/DA/YR that new oil was first produced		
	requested) If for any other reason write that reason in this box.	36,	MO/DA/YR that gas was first produced into a pipeline		
4.	The API number of this well	36.	MO/DA/VR that the following test was completed		
5.	The name of the pool for this completion	37.	Length in hours of the test		
8.	The pool code for this pool		Flowing tubing pressure - oil wells		
7.	The property code for this completion	14	Shut-in tubing pressure - gas wells		
8.	The property name (well name) for this completion	39.	Flowing cacing pressure - oil wells Shut-in casing pressure - gas wells		
9.	The well number for this completion	40,	Diameter of the choke used in the test		
10. The surface location of this completion NOTE: if the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.		41.	Barrels of oil produced during the test		
		42.	Barrels of water produced during the test		
11.	The bottom hole location of this completion	43,	MCF of gas produced during the test		
12.	Lease code from the following table:	44.	Gas well calculated absolute open flow in MCF/D		
	F Federal 8 State P Foe	46,	The method used to test the well: F Flowing		
	J Jicarilla		P Pumpling 8 Swabbing		
	N Navajo U Uta Mountain Ute I Other Indian Tribe		If other method please write it in.		
13.	The producing method code from the following table:	46.	The eignature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questione about this report		
14.	P Pumping or other artificial lift MO/DA/YR that this completion was first connected to a gas transporter	47.	The previous operator's name, the signature, printed name, and side of the previous operator's representative		
15,	The permit number from the District 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		
16,	MO/DA/YR of the C-129 approval for this completion		$\frac{1}{2} = \frac{1}{2} \left[\frac{1}{2} \left[$		
17,	MO/DA/YR of the expiration of C-129 approval for this completion				
18.	The gas or oil transporter's OGRID number	:			
19.	Name and address of the transporter of the product	· ·			
20.	The number assigned to the POD from which this product 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.				
2 1.	Product code from the following table: O Oil G Gas	. .	and a second state of the		

÷

and a second s

1. 1. A. A. A.

r's

ł

a a serie a se a serie a serie

معمول معرف مربع مربع 1944 - جاری می مو 1944 - مربع می مود