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SANTA FE
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATION
PRODUCTION OFFICE

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator
Bco, Inc.
Address
P. O. Box 669 Santa Fe, N.M.
Reasons for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐ Change name from Wiley #2 to Escrito
Recompletion ☐ Oil ☐ Condensate ☐ Gallup Unit # 2
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
If change of ownership give name and address of previous owner

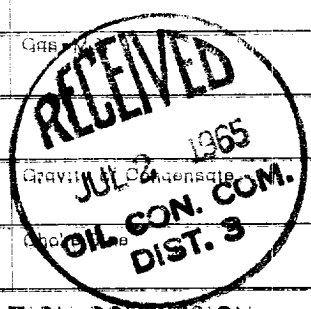
I. DESCRIPTION OF WELL AND LEASE
Lease Name Escrito Gallup Unit Well No. 2 Pool Name, including Formation Escrito Gallup Kind of Lease State, Federal or Fed
Location
Unit Letter 0, 950 Feet From The S Line and 2090 Feet From The E
Line of Section 12, Township 24N Range 5N, NMPM, San Juan County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Bco, Inc. P. O. Box 669 Santa Fe, N.M.
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
EPNG Farmington, N.M.
If well produces oil or liquids, give location of tanks. Unit 0 Sec. 12 Twp. 24N Rge. 5N Is gas actually collected? YES When

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

V. COMPLETION DATA
Designate Type of Completion - (X)
Date Spudded Date Compl. Ready to Prod. Total Depth Feet
Pool Name of Producing Formation Top Oil/Gas Pay Thickness Depth
Perforations Depth Casing Shoe
TUBING, CASING, AND CEMENTING REQUIRED
HOLE SIZE CASING & TUBING SIZE DEPTH FEET SACKS CEMENT

VI. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of liquid 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 - Bbls.
GAS WELL
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MCFD Gravity of Condensate
Testing Method (pilot, back prod.) Tubing Pressure Casing Pressure



VI. 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.
Signature
Title
Date 7-2-65
OIL CONSERVATION COMMISSION
APPROVED JUL 2 1965
BY Original Signed Emery C. Arnold
TITLE Supervisor Dist. # 3
This form is to be filed in compliance with RULE 1104.
If a request is allowed for a newly drilled or deepened well, the request must be accompanied by a tabulation of the deviation tests taken in accordance with RULE 111.
All sections must be filled out completely for allowable on new and reworked wells.
Fill out Sections I, II, and VI only for changes of owner, transporter or other such change of condition.
Separate forms must be filed for each pool in multiple completion wells.