Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| I | | TO TRA | INSF | PORTOIL | _ AND NA | IUHAL GA | | API No. | | | |
|--|---------------------------|--------------------|---------------------------------|---------------------------------|----------------------------|--|---------------------|-------------------------|---------------------------------------|-------------|--|
| Operator BILLCO ENERGY 1524. | | | | | | | Well | API NO. | | | |
| Address | | | | | | | | | | | |
| 214 East Apache Street | P.O. | Box 3 | 038, | Farmin | gton, Ne | w Mexico | 87401 | | | | |
| Reason(s) for Filing (Check proper box) | | Change in | Т | ander of | Z) Oth | er (Please expla | in) Fre | one T | 7 C P44 | ACHET | |
| New Well Recompletion | Oil | Change in | Dry C | | 7 | 73 | , <i>></i> ⊃ o e | elder 1 | MAN CC | ,, | |
| Change in Operator | | nd Gas 🔲 | | | | | • | | | | |
| of change of operator give name and address of previous operator Holog | omb Oil | l and G | as, | Inc., F | P.O. Box | 2058, Fa | rmingto | n, New Me | exico 8 | 7499 | |
| | | | | | | | - | | | | |
| II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including the control of the | | | | | | | | Kind of Lease Lease No. | | | |
| Boulder Mancos | r Mancos 7 Boulder N | | | | | ancos | | | ue, Federal or Fee JAT 240 | | |
| Location | ((| 10 | | NT. | ~~+h | 221 | 0 | | East | | |
| Unit LetterB | : | 50 | _ Feet l | From The $\frac{Nc}{2}$ | Line | and231 | Fe | et From The _ | Dabe | Line | |
| Section 35 Township | 281 | V | Rang | e 1W | , NI | мрм, R | io Arri | ba | | County | |
| | | | | | ID 1 I G 1 G | | | | | | |
| III. DESIGNATION OF TRANS Name of Authorized Transporter of Oil | SPORTE | or Conde | | ND NATU | Address (Giv | e address to wh | ich approved | copy of this for | m is to be se | ini) | |
| Giant Refining | | | | | | P.O. Box 12999, Scottsdale, AZ 85267 | | | | | |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas | | | | | | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| TO THE ADDRESS OF THE STATE OF | Twp. | Pos | Is gas actually connected? When | | | 7 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit B | S∝. 35 | 281 | , - | le gat access) commerce: | | | • | | | |
| If this production is commingled with that f | rom any ot | her lease or | pool, g | rive comming | ling order num | ber: | | | | | |
| IV. COMPLETION DATA | | 100 97.0 | ,_ | Can Wall | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v | |
| Designate Type of Completion | - (X) | Oil Well | ' ' | Gas Well | | WOLLOVEI | Dapes | Plug Dack | Sellic IXCs V | | |
| Date Spudded | Date Com | pi. Ready is | o Prod. | | Total Depth | <u> </u> | A | P.B.T.D. | | | |
| | | | | | Top Oil/Cas | Top Oil/Gas Pay | | | Table Dead | | |
| Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | | | | | | Tubing Depth | | | |
| Perforations | <u>.</u> | · | | | | - | | Depth Casing | Shoe | | |
| | | | | | | | | | | | |
| TUBING, CASING AND | | | | | CEMENTING RECORD DEPTH SET | | | SACKS CEMENT | | | |
| HOLE SIZE CASING & TUBING SIZE | | | | | DEFINSE | | | SACKS CEMENT | | | |
| | | | | | <u> </u> | | | | | | |
| | | | | | | | | | | | |
| V. TEST DATA AND REQUES | TEOR | ALLOW | ARLI | F | <u> </u> | | | <u> </u> | | | |
| OIL WELL (Test must be after re | ecovery of t | otal volume | of load | d oil and mus | s be equal so or | exceed top allo | owable for th | s depth or be fo | or full 24 hou | us.) | |
| Date First New Oil Run To Tank | Date of To | | | | | ethod (Flow, pu | | | | | |
| | | | | | Carina Press | Casing Pressure | | | C dx biza | | |
| Length of Test Tubing Pressure | | | | | Casing Fices | Casing 1 (Cool) | | | | | |
| Actual Prod. During Test | Oil - Bbls. | | | | Water - Bbls. | | | GM MCF 1 1991 | | | |
| | | | | | | | | <u> </u> | Sec. 16 | | |
| GAS WELL | | | | | | | | OIL | COM | | |
| Actual Prod. Test - MCF/D | Length of Test | | | | Bbls. Condensate/MMCF | | | Gravity of Condestate | | | |
| Trailed (aires hash as) | Tubing Pressure (Shut-in) | | | | Casing Pressure (Shut-in) | | | Choke Size | | | |
| Testing Method (pitot, back pr.) | Tooling . | | , | | | | | | | | |
| VI. OPERATOR CERTIFIC | ATE O | F COM | PLIA | NCE | | OU OON | ICEDV | ATIONI | | 7/1 | |
| I hereby certify that the rules and regul | ations of th | e Oil Conse | rvation | l | | DIL CON | NOEU A | AHON | אסועוכ | אוע | |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | | | D-4 | Date Approved | | | | | |
| is true and complete to the ocal or my anowieoge and bench. | | | | | | Date Approved JUL 16 1991 | | | | | |
| BILLCO ENERGY LTH. | | | | | By_ | Original Signed by CHARLES GHULSON | | | | | |
| Signature | | | | | 11 | Title DEPUTY OIL & GAS INSPECTOR, DIST. #3 | | | | | |
| Printed Name | my- | | Title | | Title | DEPUTY (| HL & GAS | INSPECTOR, | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| David Tentler Date 7/18/91 | - 2//~ | / Tel | | = <u>1</u> = <u>1</u> 25-34(| - 11 | | | | | | |
| Date 7/18/91 325 | -3404 | A | ., | 267 240 | <u> </u> | | | | | | |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.