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Appropriate District Office
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DISTRICT II
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DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.
Operator **BHP Petroleum (Americas) Inc.** Well API No. **30-045-27552**
Address **5847 San Felipe Ste 3600 Houston TX 77057-3005**

Reason(s) for Filing (Check proper box) ☐ Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Operator ☐ Casinghead Gas ☐ Condensate ☐
If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name **E. H. Pipkin** Well No. **26-2** Pool Name, including Formation **Basin Fruitland** Kind of Lease **State Federal or** Lease No. **SF-078019**
Location
Unit Letter **B** **1118** Feet From The **North** **1413** Feet From The **East** Line
Section **36** Township **28N** Range **11W** NMPM, **San Juan** County

III. 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)
None
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
Sunterra Gas Gathering Co. P. O. Box 1899 Bloomfield, NM 8741
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When?
No
If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res v
Date Spudded 1/1/90	Date Compl. Ready to Prod. 3/20/90	Total Depth 1817'	P.B.T.D. 1762'					
Elevations (DF, RKB, RT, GR, etc.) 5679' GR; 5687'	Name of Producing Formation KB Basin Fruitland	Top Oil/Gas Pay 1427'	Tubing Depth 1622'					
Perforations 1427-31', 1434-36'; 1512-15'; 1603-18'			Depth Casing Shoe 1811'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	8 1/2	135	98 sx (113 ft³)					
8 5/8	2 3/8	1811	568 sx (807 ft³)					
-	2 3/8	1622						

V. 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 Tank 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 Length of Test Bbls. Condensate/MMCF Gravity of Condensate
388 **24** **0** **N/A**
Testing Method (pump, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size
Back Pressure **185** **185** **3/8"**

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
Paul C. Bertoglio
Signature
Paul C. Bertoglio Sr. Pet. Engr.
Printed Name
5/1/90 **(713) 780-5446**
Date Telephone No.

OIL CONSERVATION DIVISION

MAY 08 1990

Date Approved
By **[Signature]**
Title **SUPERVISOR DISTRICT #3**

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.