

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I. Operator Robert L. Bayless		Well API No.
Address P.O. Box 168, Farmington, NM 87499		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐	Effective 7-1-90
Recompletion ☐	Casinghead Gas ☐ Condensate ☐	
Change in Operator ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Conoco 29-4	Well No. 5	Pool Name, including Formation Campo Gallup	Kind of Lease State, Federal or Fee	Lease No. NM10431
Location Unit Letter <u>H</u> : <u>1710</u> Feet From The <u>North</u> Line and <u>800</u> Feet From The <u>East</u> Line Section <u>12</u> Township <u>29N</u> Range <u>4W</u> , <u>NMPM</u> , <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Gary Williams Energy Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Bloomfield, NM 87413	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Robert L. Bayless	Address (Give address to which approved copy of this form is to be sent) P.O. Box 168, Farmington, NM 87499	
If well produces oil or liquids, give location of tanks.	Unit <u>H</u> Sec. <u>12</u> Twp. <u>29N</u> Rge. <u>4W</u>	Is gas actually connected? <u>yes</u> When? <u>7-31-87</u>

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, KT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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

OIL CON. DIV.

DIST. 3

JUL 1 1990

Gravity of Condensate

Choke Size

Casing Pressure (Shut-in)

Choke Size

Choke Size

Choke Size

Choke Size

Choke Size

Choke Size

Choke Size

Choke Size

Choke Size

Choke Size

Choke Size

Choke Size

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.

Signature Robert L. Bayless Operator
Printing Name Robert L. Bayless Title
Date 7-16-90 Telephone No. 505/326-2659

OIL CONSERVATION DIVISION

JUL 1 8 1990

Date Approved

By

Barry J. Chung

SUPERVISOR DISTRICT #3

Title

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.