

OIL CONSERVATION DIVISION

P. O. BOX 2068

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Beta Development Co.

238 Petroleum Plaza, Farmington, NM 87401

Reason for filing (Check proper box)

☐ New Well
☐ Change in Ownership
☐ Change in Ownership

Change in Transporter of:

☐ Oil
☐ Dry Gas
☐ Casinghead Gas
☒ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name Pavilion 4	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Free Federal	Lease No. 3240-01
Unit Letter P	1190	Feet From The South	Line and 1190	Feet From The East
Line of Section 4	Township 29N	Range 11W	NMPM, San Juan	County

IDENTIFICATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183 Houston, TX 77001				
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990 Farmington, NM 87401				
Is well produces oil or liquids, give location of tanks.	Unit P	Sec. 4	Twp. 29N	Rge. 11W	Is gas actually connected? when

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
Completions (DF, REB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Remarks			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE

(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 Ran To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Time, Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

Time, Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Time, Prod. (shut-in, test pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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 is true and complete to the best of my knowledge and belief.

Richard Parrish
(Signature)
Production Clerk
(Title)
March 28, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED

APR 05 1984

BY

SUPERVISOR

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.