	State of New Energy, Minerals and Natura		RECEIVED	Form C-104 Revised 1-1-89 See Instructions	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OR CONCEDUAT	TION DIVISION		at Bottom of Page	
<u>ISTRICT II</u> P.O. Drawer DD, Anesia, NM 88210	OIL CONSERVAT P.O. Box	: 2088	··· 2 → <b>1992</b>		
DISTRICT III	Santa Fe, New Mex	uco 87504-2088	O. C. D.	Cil	
1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWABL	E AND AUTHORIZAT	ION	C¢	
I. Uperator			Well API No.		
BHP Petroleum (Ame	ricas) Inc.		30-005-62	813	
Address 5847 San Felipe #3	600, Houston, Texas	77057			
Reason(s) for Filing (Check proper box)	Change in Transporter of:	Other (Please explain)			
New Weil	Oil Dry Gas			1 1	
Change in Operator	Casinghead Gas Condensate XX				
if change of operator give name and address of previous operator		A CA	$n \rightarrow \infty$	·	
II. DESCRIPTION OF WELL A	ND LEASE	na Julkoro-0	Kind of Lease	an Har Lease No.	
Lease Name Puffer State	Well No. Pool Name, Includin 1 <del>Wildcat</del>	g ronizion	State X Kit & X &		
				<b>T7</b> (	
Unit LetterD	: 660 Feet From The NO	rth_Line and990	Feet From The _	WestLine	
Section 24 Township	8S Range 27E	, NMPM, Chave	es	County	
	SPORTER OF OIL AND NATUR	RALGAS			
Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which	approved copy of this fo	orm is to be sent)	
Amoco Pipeline Inte	ercorporate Trucking	502 N. West At Address (Give address to which	re., Levell	and, $TX / 9336$	
Name of Authorized Transporter of Casing Enron Gas Marketin		P.O.Box 1188,			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connected?	When?		
give location of tanks.	D 24 85 27E	Yes	7/15/91		
If this production is commingled with that I IV. COMPLETION DATA	from any other lease or pool, give comming! Oil Well Gas Well		Deepen Plug Back	Same Res'v Diff Res'v	
Designate Type of Completion	- (X)			1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	<b>P.B.</b> T.D.	1	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Perforations	s		Depth Casing Shoe		
	TUBING, CASING AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT	
				<u> </u>	
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR ALLOWABLE recovery of total volume of load oil and mus	t be equal to or exceed top allow	able for this depth or be	for full 24 hours.)	
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pury	o, gas lift, etc.)		
Level of Tore	Tubing Pressure	Casing Pressure	Choke Size	e	
Length of Test	Tuong Treasure		Gas- MCF		
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCP		
GAS WELL Actual Prod. Test - MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of	Condensate	
	/// · · · · ·	Casing Pressure (Shut-in)	Choke Siz	2	
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Freedore (Gries in)			
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION DIVISION			
Division have been complied with and that the information given above			7		
is trac and complete to the best of my knowledge and belief.		Date Approved	Date Approved		
James N. Jandberg			ORIGINAL SIGNED BY		
James G. Sandbe		ByMIKE WILLIAMS SUPERVISOR, DISTRICT II			
Printed Name	rg, <u>Reg.</u> Affairs Re Tide 713/780-5396	Title			
9/21/92 Date					
		_11		أشعد الباعيد المتعادي والمتعاد	

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.

All sections of this form must be filled out for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filled for each pool in multiply completed wells.