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

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

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

RECEIVED

OCT 20 1992

O. C. D.  
ARTESIA OFFICE

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

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

Operator Bird Creek Resources, Inc.	Well API No. 30-015-27083
Address 810 South Cincinnati, Suite 110 Tulsa, Oklahoma 74119	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) CASINGHEAD GAS MUST NOT BE Recompletion <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/> FLARED AFTER 1-5-93 Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Condensate <input type="checkbox"/> UNLESS AN EXCEPTION FROM THE B. L. M. IS OBTAINED.	
If change of operator give name and address of previous operator	

### II. DESCRIPTION OF WELL AND LEASE

Lease Name Hallwood Federal	Well No. 1	Pool Name, Including Formation E. Loving Delaware	Kind of Lease State, Federal or Fee	Lease No. NM-13233
Location Unit Letter P : 990 Feet From The South Line and 660 Feet From The East Line Section 3 Township 23-S Range 28-E, NMPM, Eddy County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pride Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) PO Box 2436 Abilene, TX 79604					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Transwestern Pipeline	Address (Give address to which approved copy of this form is to be sent) 1400 Smith Road, Houston, TX 77251					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 3	Twp. 23S	Rge. 28E	Is gas actually connected? Well S1	When? Est. gas connect 11-1-92

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9-15-92	Date Compl. Ready to Prod. 10-7-92		Total Depth 6350'		P.B.T.D. 6298'			
Elevations (DF, RKB, RT, GR, etc.) 2997' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 6128'		Tubing Depth 6060'			
Perforations 6128' - 6178'					Depth Casing Shoe 6350'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12.25"	8.625", 24#		0-315'		225 cmt. circ.			
7.875"	5.5", 15.5#		0-6350'		1395, cmt. circ.			

### 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 10-7-92	Date of Test 10-10-92	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 4hr.	Tubing Pressure --	Casing Pressure --	Choke Size Post ID-2 11-6-92 camp & B13
Actual Prod. During Test 24 hr.	Oil - Bbls. 138	Water - Bbls. 288	Gas- MCF 159

### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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  
Brad D. Burks  
Printed Name  
10-14-92  
Date  
Agent  
918-582-3855  
Title  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved OCT 20 1992  
By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

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.