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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65
JUL 24 1968
OFFICE OF O.C.C.
AM '68

I. Operator
Bell Petroleum Company

Address
P. O. Box 1538 - Midland, Texas 79701

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "K"	Well No. 2	Pool Name, Including Formation North Bagley-Pennsylvanian R-3988 Bagley Lower Penn North	Kind of Lease State, Federal or Fee State	Lease No. K-1763
Location Unit Letter "L" ; 1980 Feet From The South Line and 660 Feet From The West Line of Section 21 Township 11-S Range 33-E , NMPM, Lea 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"/> Service Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) 3411 Knoxville Avenue - Lubbock, Texas 79413			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 67 - Monument, New Mexico 88265			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 21	Twp. 11S	Rge. 33E
	Is gas actually connected?			When 7/19/68

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)	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input checked="" type="checkbox"/> New Well	<input type="checkbox"/> Workover	<input type="checkbox"/> Deepen	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Same Res'v.	<input type="checkbox"/> Diff. Res'v.
Date Spudded April 1, 1968	Date Compl. Ready to Prod. July 19, 1968		Total Depth 10,170'		P.B.T.D. 10,144'			
Elevations (DF, RKB, RT, GR, etc.) 4283.9' GR	Name of Producing Formation Lower Penn		Top Oil/Gas Pay 9758'		Tubing Depth 9740'			
Perforations 9758-65-66-9930-70-90-10,023-92-100'					Depth Casing Shoe 10,170'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17"	13-3/8"		394'		400 sx			
11"	8-5/8"		3800'		350 sx			
7-7/8"	5-1/2"		10,170'		332 sx Incon			
	2-3/8"		9740'					

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 Tanks July 19, 1968	Date of Test 7/18-19/68	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 400#	Casing Pressure Pkr.	Choke Size 2 1/64"
Actual Prod. During Test 532	Oil - Bbls. 342	Water - Bbls. 190	Gas - MCF 600 (1754:1)

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)

Production Supervisor

(Title)

July 22, 1968

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY **John W. Runyan**

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.