

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Bliss Energy Corporation		
Address	P. O. Box 1817, Hobbs, N.M. 88241		
Reason(s) for filing (Check proper box)	Other (Please explain)		
<input type="checkbox"/> New Well	Change in Transporter of:	Operator's Name Change	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil		<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		<input type="checkbox"/> Condensate

If change of ownership, give name and address of previous owner: Bliss Petroleum, Inc., P. O. Box 1817, Hobbs, N.M. 88241

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
State AR	3	Echols Devonian	State, Federal or Fee State	LC-1796-1
Location				
Unit Letter	L	: 660 Feet From The	North Line and 990 Feet From The	West
Line of Section	2	Township	11S	Range 37E, 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"/>	Address (Give address to which approved copy of this form is to be sent)					
AMCO Production Company - Trucks	P. O. Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Req.	Is gas actually connected?	When
	K	2	11S	37E	No	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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.

Paul Bliss
(Signature)
President
June 4, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 2 1986, 19 _____
BY _____
TITLE ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or reopened 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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Dill. R.
Date Spudded 1-10-86		Re-entered		Date Compl. Ready to Prod. 2-6-86		Total Depth 11,580' KB		P.B.T.D. 11,322' KB	
Elevations (DF, RKB, RT, CR, etc.) 3056' RKB		Name of Producing Formation Echols Devonian		Top Oil/Gas Pay 11,260' KB		Tubing Depth 11,310' KB			
Perforations 11,260 - 310' (100-0.5" holes)						Depth Casing Shoe 11,500' (liner shoe)			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"		11 3/4" 42#		353'		350 - Circ			
11"		8 5/8" 32#		5000'		1120 - Circ			
7 7/8"		5 1/2" Liner 17 & 20#		4799 - 11,500'		1050 - Calc. near surf			
		2 7/8" 6.5#		11,310'					

V. 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 Run To Tanks 2-7-86	Date of Test 2-12-86	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24 Hours	Tubing Pressure 25	Casing Pressure 25	Choke Size 2" - open
Actual Prod. During Test 145 BTF	Oil-Bbls. 145 (40.1 API Grav.)	Water-Bbls. 0	Gas-MCF TSTM

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

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 AUG 22 1986
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 FEB 21 1986
 O.C.D.
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