

| | | | |
|-------------------|-----|--|--|
| DISTRIBUTION | | | |
| ANTA FE | | | |
| ILE | | | |
| S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |
| PERORATION OFFICE | | | |

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-
Effective 1-1-65

I. Operator
Operator
BLK OIL COMPANY
Address
P. O. BOX 310, ROSWELL, NEW MEXICO 88201

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 9/7/75
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED.

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE. R-5102

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|---------------|---|--|---------------------|
| Lease Name Bagley State | Well No. 1 | Pool Name, Including Formation North Bagley Penn | Kind of Lease State, Federal or Fee State | Lease No. LG1733 |
| Location Unit Letter P ; 559 Feet From The East Line and 660 Feet From The South | | | | |
| Line of Section 36 Township 11S Range 32E , 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"/> Navajo Crude Oil Purchasing Co. | Address (Give address to which approved copy of this form is to be sent) Box 175, Artesia, New Mexico 88210 | | | |
| 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 P | Sec. 36 | Twp. 11S | Rge. 32E |
| Is gas actually connected? | | When | | |

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 ^{ty} | Diff. Res ^{ty} |
| Date Spudded 4/3/75 | Date Compl. Ready to Prod. 7/7/75 | Total Depth 10,500 | P.B.T.D. 10,477 | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 4314 GR | Name of Producing Formation Bagley Penn | Top Oil/Gas Pay 9247 | Tubing Depth 9195 | | | | | |
| Perforations 9247-10107 | 1/2" 56 holes | | Depth Casing Shoe 10,500 | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17 | 12 3/4 | | 397 | | 400 | | | |
| 11 | 8 5/8 | | 3755 | | 400 | | | |
| 7 7/8 | 5 1/2 | | 10,477 | | 650 | | | |

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)

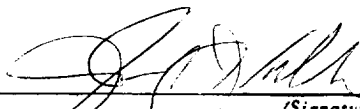
| | | | |
|---|-------------------------|--|----------------------|
| Date First New Oil Run To Tanks 7/7/75 | Date of Test 7/9/75 | Producing Method (Flow, pump, gas lift, etc.) Flowing | |
| Length of Test 24 hours | Tubing Pressure 150# | Casing Pressure Packer | Choke Size 24/64" |
| Actual Prod. During Test 330 | Oil-Bbls. 330 | Water-Bbls. -0- | Gas-MCF 200 |

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.


President
7/17/75
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL 21 1975, 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 multiple