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- ⊢-	DISTRIBUTION SANTA FE	REQUEST FO	NSERVATION COMMISSION OR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
-	FILE U.S.G.S.		AND SPORT OIL AND NATURAL GA	S		
<b>⊢</b>	LAND OFFICE	AUTHORIZATION TO TRAIN		1.		
	TRANSPORTER GAS GAS					
	OPERATOR					
I. L	PRORATION OFFICE		<del></del>			
	Address  c/o M. M. Ronck, 1683 Breadeny, Lubback, Texas 79401					
-	Reason(s) for filing (Check proper box)	Breakey, Lindsck, Ital	Othe CASENCE PRINTING GA	S MUST NOT BE		
i	New Well	Change in Transporter of:	FLARED AFRER	11/1/24		
- 1	Recompletion	Oil Dry Gas Castnahead Gas Condens		EPTION TO R-4070		
Ĺ	Change in Ownership	Casinghead Gas Condens	ate IS OBTAINED.			
	f change of ownership give name nd address of previous owner	THIS WELL HAS BEEN P DESIGNATED BELOW, IF NOTIFY THIS OFFICE.	LACED IN THE POOL! YOU DO NOT CONCUR	i de Normal de la della		
II. I	DESCRIPTION OF WELL AND I	LEASE	R-4915 mation Kind of Lease	Lease No.		
	Lease Name  BASS-STATE	Well No. Pool Name, Including For	State, Federal			
	Location Unit Letter F : 198	Feet From TheLine	and 1650 Feet From Th	ne <u>N</u>		
	Line of Section 16 Tow	mship <b>7 - 5</b> Range <b>3</b>	S - E , NMPM, Reser	County		
L						
III. I	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	FER OF OIL AND NATURAL GAS	Address (Give address to which approve	ed copy of this form is to be sent)		
i l	Tesero Crude 811		8700 Tesoro Drive. Sea Address (Give address to which approve	Antonio, Tex. 78286		
1	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas	Address (Give address to which approve	ea copy of this form is to be sent,		
		Unit Sec. Twp. Rge.	Is gas actually connected? When	1		
ļ	If well produces oil or liquids, give location of tanks.	K 16 7-8 3	No	YSM		
1	If this production is commingled with	th that from any other lease or pool, g	give commingling order number:	• • •		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.		
	Designate Type of Completic	on – (X)				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	10/31/73	5/1/74 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)		4122	4217		
	4252 GR Perforations	Sen Andres	L	Depth Casing Shoe		
	4122, 34, 37, 87, 90, 4218, 46, 51, 64, 67 TUBING, CASING, AND CEMENTING RECORD					
İ	101 5 6175	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	HOLE SIZE	8.5/8	317	208		
	7' 7/4"	5 1/2	4389	175		
		2"	4217			
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a) able for this de	pth or be for full 24 hours)	and must be equal to or exceed top allow-		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lif	i, eic.j		
	12/1/73	Tubing Pressure	Casing Pressure	Choke Size		
	Length of Test	, upary	40	2"		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
	26 PELS	25	1	TSA		
<b>ল</b>						
	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		
	CERTIFICATE OF COMPLIAN	I	OIL CONSERVA	TION COMMISSION		
V1.	CERTIFICATE OF COMPLIA	(CE	APPROVED SEP 23 197. 19			
	I hereby certify that the rules and	regulations of the Oil Conservation				
		with and that the information given ne best of my knowledge and belief.		BY. All Mary		
			TITLE SUPERI	ISOR DISTRICT		
		V	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.			
	11/1/1	<b>.</b> .				
	(Signal Signal S	nature)				
	V. W. Ronok, Ann	1	All sections of this form my	All sections of this form must be filled out completely for allow-		
	(1	ricle)	able on new and recompleted wells.  Fill out only Sections I. H. III. and VI for changes of owner,			

9/19/74 (Date)

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.

## INCLINATION REPORT

ARNO R. DALBY % W. W. Ranck 1603 Broadway Avenue Lubbock, Texas 79401

BASS-STATE #1 1,650' FNL & 1,980' FEL, Section 16, T-7-S, R-35-E Roosevelt County, New Mexico

## INCLINATION RECORD

Depth (feet)	Angle of Inclination (degrees)	Displacement (feet)	Accumulative Displacement (feet)
312	0.75	4.09	4.09
812	0.75	6.55	10.64
1,308	1.00	8.68	19.32
1,790	1.00	8.44	27.76
2,118	1.25	7.18	34.94
2,608	1.00	8.58	43.52
3,102	1.25	10.82	54.34
3,485	1.00	6.70	61.04
3,811	1.00	5.71	66.75
4,226	0.75	5.44	72.19
4,370	0.75	1.89	74.08

I hereby certify that I have personal knowledge of the data and facts placed on this report, and that such information given above is true and complete.

P.O. Box 1000

Levelland, Texas 79336

Sworn and Subscribed before me, this the 14th day of November, 1973.

Hockley County, Texas