

DISTRIBUTION
SANITARY
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER
OPERATOR
PRORATION OFFICE

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
OIL AND NATURAL GAS
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Revised 1-1-64
U.S. GPO: 1964 O-471-110

I.

Operator	
Belco Petroleum Corporation	
Address	
P.O. Box 19234, Houston, Texas 77024	
Reason(s) for filing (Check one):	
New Well	Change in Transporter
Recompletion	Oil
Change in Ownership	Gas/condensate

If change of ownership give name and address of previous owner:

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Section	Range	County	Kind of Lease	Lease No.
Shell State "H"	1	North Bagley Penn		State, Federal	K-3027
Location					
Unit Letter	A	554	East From	North	554
Line of Section	8	Township	12-S	Range	33-E
, NMPM, Lea County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	XX	Address (Give address to which approvals are to be sent)				
Miller Oil Purchasing Company		P.O. Box 1308, Jackson, Mississippi 39205				
Name of Authorized Transporter of Gas/condensate	XX	Address (Give address to which approvals are to be sent)				
Warren Petroleum Company		P.O. Box 1589, Tulsa, Oklahoma 74102				
If well produces oil and gas, give location of tanks.	A	8	12S	33E	Yes	3/16/71

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Drill Well	Re-drill Well	Workover	Deepen	Other
Date Spudded	Date Comp. Reached	Date Placed			
Elevations (DF, RKB, RT, CR)	Name of Perforator	Perforation Depth	Perforation Pay		
Perforations					
TUBING, CASING AND CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	BACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

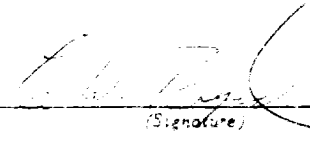
Date First New Oil Run To Tanks	Date of Test	Flowing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil Bbls.	Water Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Seal. Condensate/MMCF
Testing Method (pilot, back prod)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)

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.


C.W. Byrd
Production Assistant
September 19, 1975

OIL CONSERVATION COMMISSION

APPROVED _____
BY _____
TITLE _____

This form is to be filed in accordance with RULE 110a.
If this is a request for allowable on a newly drilled or deepened well, this form must be accompanied by a calculation 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, IV, V for changes of owner, well name or number, or transporter or for any change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.