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Appropriate District Office  
DISTRICT I  
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DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator William C. Bahlburg		Well API No. 30-025-30702
Address 14875 Landmark Blvd., Suite 216, Dallas, TX 75240		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Gas Transporter Connected		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lowe	Well No. 1	Pool Name, Including Formation King Wolfcamp	Kind of Lease State, Federal or Fee <input checked="" type="radio"/>	Lease No.
Location Unit Letter M : 900 Feet From The south Line and 50 Feet From The west Line Section 25 Township 13S 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"/> Sun Company, Inc. (R&M)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2039, Tulsa, OK 74102	
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 1150, Midland, TX 79702	
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 25
	Twp. 13S	Rge. 37E
	Is gas actually connected? yes	When? 8/11/93

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	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 2/3/93	Date Compl. Ready to Prod. 7/1/93	Total Depth 12,272'	P.B.T.D. 11,970'					
Elevations (DF, RKB, RT, GR, etc.) 3870 KB	Name of Producing Formation L. Wolfcamp	Top Oil/Gas Pay 10,119'	Tubing Depth 10,070'					
Perforations 10,119 - 10,124'			Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	12-3/8"	408'	circ. - 400sx					
12-1/4"	9-5/8"	4,651'	circ. - 1350sx					
7-7/8"	5-1/2"	12,272'	1900sx					

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 Tank 6/30/93	Date of Test 7/20/93	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 410#	Casing Pressure 50#	Choke Size 18/64"
Actual Prod. During Test 208	Oil - Bbls. 208	Water - Bbls. -0-	Gas - MCF 275

GAS WELL

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

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature  
William C. Bahlburg  
Printed Name  
10/8/93  
Date  
Title  
214/392-0123  
Telephone No. PSQ

OIL CONSERVATION DIVISION

Date Approved OCT 14 1993

By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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