

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION 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-11
Effective 1-1-65

I. Operator
Energy Reserves Group, Inc.
Address
P. O. Box 2437, Midland, TX 79702
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)
Added transporter of casinghead gas & date sales line connected

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bledsoe	Well No. 1	Pool Name, Including Formation Tanneyhill/Granite wash	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter H ; 1874 Feet From The North Line and 776 Feet From The East Line of Section 11 Township 6-S Range 33-E , NMPM, Roosevest 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"/> Phillips Petroleum Company -Trucks	Address (Give address to which approved copy of this form is to be sent) 4001 Pembroke, Odessa, TX 79762					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 300, Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 11	Twp. 6s	Rge. 33E	Is gas actually connected? Yes	When 5-1-81

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'v.	Diff. Res'v.
Date Spudded 3-18-80	Date Compl. Ready to Prod. 9-11-80		Total Depth 7900		P.B.T.D. 7868			
Elevations (DF, RKB, RT, GR, etc.) 4402 GR	Name of Producing Formation Granite Wash		Top Oil/Gas Pay 7675		Tubing Depth 7783			
Perforations 7695, 7699, 7702, 05, 12, 17, 24, 29, 32, 35, 37, 76, 86, 97, 7821, 54, 56 & 7859, (18 0.40" holes)					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		369'		350			
8 5/8"	11"		3293'		1400			
7 7/8"	4 1/2"		7880'		400			
	2 3/8"		7783'					

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)

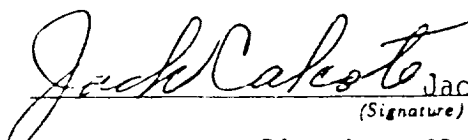
Date First New Oil Run To Tanks 9-15-80	Date of Test 10-8-80	Producing Method (Flow, pump, gas lift, etc.) Pump 1 1/4" X 22'	
Length of Test 24 Hrs	Tubing Pressure	Casing Pressure 225 psi	Choke Size Open
Actual Prod. During Test	Oil-Bbls. 12	Water-Bbls. 18	Gas-MCF 67.8

GAS WELL

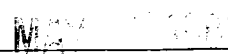
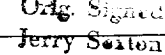

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.


Jack Calcote
(Signature)
District Clerk
(Title)
May 4, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED , 19
BY 
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 able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes well name or number, or transporter, or other such change of
Separate Form C-104 must be filed for each pool in