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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. 3002529817
Address 14875 Landmark Blvd., Suite 216, Dallas, TX 75240	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/> Other (Please explain) <i>show gas connection date</i>	

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Christmas	Well No. 1	Pool Name, Including Formation NE. Lovington Wolfcamp Pool	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>D</u> : <u>1200</u> Feet From The <u>North</u> Line and <u>600</u> Feet From The <u>West</u> Line Section <u>7</u> Township <u>16S</u> Range <u>37E</u> , 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"/> <i>Marathon Refining Co.</i>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 5050, Bartlesville, OK 74005-5050					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 7	Twp. 16S	Rge. 37E	Is gas actually connected? Yes	When? November 5, 1992

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 x	Gas Well	New Well x	Workover Rentry	Deepen	Plug Back x	Same Res'v	Diff Res'v
Date Spudded 9/30/92	Date Compl. Ready to Prod. 10/20/92		Total Depth 10,750 ft.		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3856.9 GR	Name of Producing Formation Lower Wolfcamp		Top Oil/Gas Pay 10,530 ft.		Tubing Depth 10,450 ft.			
Perforations 10,556 - 10,566 ft.					Depth Casing Shoe 10,743 ft.			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8		373'		395			
11	8-5/8		4585'		1600			
7-7/8	5-1/2		10743'		450			

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 10/20/92	Date of Test 10/23/92	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 8 hrs	Tubing Pressure 820#	Casing Pressure 0#	Choke Size 18/64"
Actual Prod. During Test	Oil - Bbls. 205	Water - Bbls. 0	Gas- MCF 460

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. 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 William C. Bahlburg
Date 1/4/93
Title Owner
Telephone No. 214/392-0123

OIL CONSERVATION DIVISION

Date Approved JAN 12 1993
By *Paul K. Smith*
Title *Geologist*

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.