P. O. DOX 2000     Instruction     P. O. DOX 2000     Instruction     P. O. DOX 2000     SANTA FE, NEW MEXICO 87501     P. O. DOX 2000     P. O. DOW 2000		
U.G.G.   REQUEST FOR ALLOWABLE     In AMEFORTER   OIL     In AMEFORTER   OIL     OPERATOR   AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS     OPERATOR   AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS     PROMATION OFFICE   Operation     Address   10,000 Old Katy Rd., Suite 100, Houston, Texas 77055     Recons(s) for filing (Check proper box)   Other (Pirase capian)     New Well   Change in Transporter of:     Recompletion   Oil   Dry Gas     Change in Ownership   Casinghead Gas   CondensateXX     If change of ownership give nerice   and address of previous owner   Xind oi Lease     Lease Name   Well No.   Pool Name, Including Formation   State, Federal or Fee Fe		
In AMPROPRIE   OIL   Image: Content of the second		
PAGNATION OFFICE     Cperator     Belco Development Corporation     Address     10,000 Old Katy Rd., Suite 100, Houston, Texas 77055     Resson(s) for filing (Check proper bas)     New Well   Change in Transporter of:     Accompletion   Other (Pirase explain)     Other (Pirase explain)     New Well   Change in Transporter of:     Accompletion   Other (Condensate XX)     If change of ownership give name     and address of previous owner     DESCRIPTION OF WELL AND LEASE     Lease Name     Bass Federal   2     South Salt Lake (Morrow)   State, Federal or Fee Fee		
Belco Development Corporation     Address     10,000 01d Katy Rd., Suite 100, Houston, Texas 77055     Reoson(s) for filing (Check proper box)     New Well   Change in Transporter of:     Becompletion   Oil     Change in Ownership   Casingheod Gas     If change of ownership give name     and address of previous owner     DESCRIPTION OF WELL AND LEASE:     Lease Name     Bass Federal   2     South Salt Lake (Morrow)   State, Federal or Fee Fee		
10,000 Old Katy Rd., Suite 100, Houston, Texas 77055     Reoson(s) for filing (Check proper box)     New Well   Change in Transporter of:     Recompletion   Oil     Change in Ownership   Casinghead Gas     CondensateXX   If change of ownership give name     and address of previous owner		
New Well   Change in Transporter of:     Becompletion   Oil     Change in Ownership   Casinghead Gas     If change of ownership give name     and address of previous owner     DESCRIPTION OF WELL AND LEASE     Lease Name     Bass Federal   2     South Salt Lake (Morrow)   State, Federal or Fee Fee		
Aecompletion   Oil   Dry Gas     Change in Ownership   Casinghead Gas   CondensateXX     If change of ownership give name   and address of previous owner   CondensateXX     DESCRIPTION OF WELL AND LEASE   Vell No.   Pool Name, Including Formation   Kind of Lease     Bass Federal   2   South Salt Lake (Morrow)   State, Federal or Fee Fee		
If change of ownership give name and address of previous owner     DESCRIPTION OF WELL AND LEASE     Lease Name     Bass Federal     2   South Salt Lake (Morrow)     State, Federal or Fee Fe		
and address of previous owner     DESCRIPTION OF WELL AND LEASE.     Lease Name   Well No. Pool Name, Including Formation     Bass Federal   2     South Salt Lake (Morrow)   State, Federal or Fee Fee		
Lease NameWeil No.Pool Name, Including FormationKind of LeaseBass Federal2South Salt Lake (Morrow)State, Federal or Fee Fe		
Bass Federal 2 South Salt Lake (Morrow) State, Federal or Fee Fe		Lease
	ederal 6W-	- <u>105</u>
P 660 For South Line and 1300 For From The East	:	
30 - 20S - 33E - 16a		Соч
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Name of Authorized Transporter of Cil     or CondensateXX     Address (Give address to which approved copy of	this form is to be s	sentj
UPG, Inc. P. O. Box 3339, Abilene, TX 79	this form is to be s	sent)
Kine of Authorized Transporter of Casinghead Gasor Dry Gas XXAddress (Give address to which approved copy of P. 0. Box 1432, El Paso, TexasLlano Inc91.66797%P. 0. Box 1320, HObbs, New Mexi	/99/8	
If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When 9-9	9-76 Re-conn 16-77	nect
If this production is commingled with that from any other lease or pool, give commingling order number:	_0=11	
COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Baci	k Same Res'v. D	Ďiff. F
Designate Type of Completion - (X)	i i	
Date Spudded		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing De	epih	
Perforations Depth Ca	sing Shoe	
TUBING, CASING, AND CEMENTING RECORD		
HOLE SIZE CASING & TUBING SIZE DEPTH SET	SACKS CEMENT	·
	<u></u>	
. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load all and must be able for this depth or be for full 24 hours)	equal to or exceed	ed top
Date First New Oil Run To Tarks Date of Test Producing Method (Flow, pump, gas lift, etc.)		
Length of Test Tubing Pressure Casing Pressure Choke Siz	20	
Actual Pred. During Test Oil-Bble. Water-Bble. Gas-MCF	F	
GAS WELL		
Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF Gravity o	l Condensate	
Testing Method (pitot, back pr.) Tubing Pressure (Shnt-in) Cosing Pressure (Shut-in) Choke Sh	1.	
CERTIFICATE OF COMPLIANCE DIL CONSERVATION DIV	ISION	
I hereby certify that the rules and regulations of the Oil Conservation APPROVED JUN 2 1 1984		
Division have been complied with and that the information given    54dip W. Seay		
above is true and complete to the best of my knowledge and bellef. BY Educe Educe Educe TITLE Oil & Gas Inspector		
This form is to be filed in compliance		
If this is a request for allowable for a	newly drilled or tebulation of the	r dee
(Signature) (Countant tools taken on the well in accordance with All eactions of this form must be filled	h MULK 111.	
(Tiple) able on new and recompleted wells.		
6/13/84 (Date) Fill out only Sections 1, 11, 111, and well name or number, or transporter, or other	r such change of	r conu
Separate Forms C-104 must be filed completed wells.	for each poul i	10 mi