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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
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DISTRICT III
1003 Rio Brazos Rd., Abec. 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	Seay Exploration, Inc.	Well API No.	30-025-31145
Address 407 N. Big Spring, Suite 200, Midland, Texas 79701			
Reason(s) for Filing (Check proper box) ☒ New Well ☐ Change in Transporter of: ☐ Recompleted ☐ Oil ☐ Dry Gas ☐ ☐ Change in Operator ☐ Condensed Gas ☐ Condensate ☐			
If change of operator give name and address of previous operator			

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Bilberry	Well No.	1	Pool Name, including Formation	House-Yates- Seven Rivers	Kind of Lease	State, Federal or <u>Fed</u>	Lease No.	
Location Unit Letter <u>G</u> : <u>1980</u> Feet From Top <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>6</u> Township <u>20-S.</u> Range <u>39-E</u> N.M.P.M. Lea County									

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent) None					
Name of Authorized Transporter of Condensed Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks	Unit	Sec.	Twp.	Rgn.	Is gas actually connected?	When?
	G	6	20-S	39-E	No	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res v
		X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
1-29-91	4-2-91		7750'		- 3300 CIPB 30' Cement on top.			
Elevations (DF, AKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
	Yates-Seven Rivers		2884		2798'			
Performance	Yates-Seven Rivers @ 2884 - 3119				Depth Casing Shoe			
					4837'			

TUBING, CASING AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	1696'	800 sx
7-7/8"	4-1/2"	4837'	160 sx
4-1/2"	2-3/8"	2798'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of liquid oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Due To Test	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Water - Bbls.	Gas - MCF
Actual Prod. During Test	Oil - Bbls.		

GAS WELL

Actual First Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
4-4-91	4	0	0
Flowing Method (pump, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back pressure	620	550	1/4"

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 Ann E. Ritchie Agent
Printed Name Ann E. Ritchie Title (915) 684-6381
Date 4-22-91 Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____
By ORIGINAL SIGNED BY JERRY FEXTON
DISTRICT 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 tubulation 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.