

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Branco Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Form C-104  
Revised February 10, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Mid-Continent Energy Operating Company 100 W. 5th Street, Suite 450 Tulsa, Oklahoma 74103		OGRID Number 150065
		Reason for Filing Code AO 8-1-97 AG 1-1-98
API Number 30 - 025-26888	Pool Name Antelope Ridge Strawn (Gas)	Pool Code 70450
Property Code 17986	Property Name Belco Federal	Well Number 1

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
0	15	23S	34E		76.0	South	1980	East	Log

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Le Code	Producing Method Code	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
015694	Navajo Refining Company P.O. Box 159 Artesia, NM 88211-0159	0946310	0	0-10-23S-34E
003002	BIA Oil Producers 104 S. Pecos Midland, TX 79701	0946330	G	0-10-23S-34E

IV. Produced Water

POD	POD ULSTR Location and Description

V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules 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:

Printed name:

Stephanie Bates

Title:

Production Technician

Date:

9-16-98

Phone:

918-587-6363

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED BY

Title:

Approval Date:

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

District I  
PO Box 1960, Hobbs, NM 88241-1960  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Branson Rd., Aztec, NM 87410  
District IV  
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☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address MID-CONTINENT ENERGY OPERATING COMPANY 100 W. Fifth Street, Suite 450 Tulsa, Oklahoma 74103-4287		OGRID Number 150065
API Number 30 - 025-26888	Pool Name Antelope Ridge Strawn (Gas)	Pool Code 70450
Property Code 17986	Property Name Belco Federal	Well Number 1

II. Surface Location

UL or lot no. 0	Section 15	Township 23S	Range 34E	Lot Idn	Feet from the 760	North/South Line South	Feet from the 1980	East/West line East	County Lea
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Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
12 Loc Code F	12 Producing Method Code P	14 Gas Connection Date	14 C-129 Permit Number	14 C-129 Effective Date	14 C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
012852	Koch Services, Inc. P.O. Box 1558 Breckenridge, TX 76024	0946310	0	0-15-23S-34E
020809	Sid Richardson Gasoline Co. 201 Main Street Fort Worth, TX 76102	0946330	G	0-15-23S-34E

IV. Produced Water

POD 946350	POD ULSTR Location and Description 0-15-23S-34E
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules 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:

Printed name: Stephanie B. Bates

Title: Production Technician

Date: December 5, 1995 Phone: (918) 587-6363

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

Title:

Approval Date:

DEC 20 1995

If this is a change of operator fill in the OGRID number and name of the previous operator:  
014832 MID-CONTINENT ENERGY, INC.

Previous Operator Signature

Printed Name: Stephanie B. Bates

Title: Production Technician Date: 12-5-95

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

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

I.

Operator Mid-Continent Energy, Inc.	Well API No. 30-025-26888
Address 401 S. Boston, Suite 3400, Tulsa, Oklahoma 74103-4071	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Effective 01-01-94
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Belco Federal	Well No. 1	Pool Name, Including Formation Antelope Ridge Strawn	Kind of Lease State, Federal or Fee	Lease No. NM-13641 (PT)
Location			NM-13838 (PT)	
Unit Letter 0 : 760 Feet From The South Line and 1980 Feet From The East Line				
Section 15 Township 23S Range 34E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Koch Services, Inc.	P. O. Box 1558, Breckenridge, TX 76024
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Sid Richardson Gasoline Co.	201 Main Street, Fort Worth, TX 76102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ?

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
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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

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 Jack E. Harris  
Printed Name Jack E. Harris Production Engineer  
Date 12-08-93 Telephone No. 918-587-6363

OIL CONSERVATION DIVISION

Date Approved DEC 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.