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

State of New Mexico E. y, Minerals and Natural Resources Departmen

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

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

> REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I	TO TRANSPORT OIL		II API No.	
Operator KAISER-FRANCIS ()	KAISER-FRANCIS OIL COMPANY		30-025-08490	
Address P.O. BOX 21468,	TULSA, OKLA. 74121-1468			
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator	Change in Transporter of: Oil Dry Gas Casinghead Gas Condensate X		ive 6/16/92	
If change of operator give name and address of previous operator Corre	oco, Inc., P. O. Box 219	97, Houston, TX 77252		
II. DESCRIPTION OF WELL	AND LEASE	F. Vie	nd of Lease No.	
Lease Name BELL LAKE UNIT	Well No. Pool Name, Includi 3 BELL LAKE		te, Federal or Fee E-5898-1	
Location C Unit LetterC	: Feet From The	EAST North Line and660	Feet From The SOUTH Line	
Section 6 Township	p 24 S Range 3	4 E , NMPM, LEA	County	
III. DESIGNATION OF TRAN	SPORTER OF OIL AND NATU	RAL GAS		
Name of Authorized Transporter of Oil	or Condensate X	Address (Give address to which appro-		
Enron Oil Trading & 'I' Name of Authorized Transporter of Casing		P. O. Box 1188, Hous		
Transwestern Pipeline	Co.	P. O. Box 1188, Hous		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	g	hen ?	
give location of tanks.	C 6 248 34E	Yes	n/a	
IV. COMPLETION DATA	from any other lease or pool, give comming	mile order humber.		
	Oil Well Gas Well	New Well Workover Deeper	n Plug Back Same Res'v Diff Res'v	
Designate Type of Completion 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		Depth Casing Shoe	
11015 0175	TUBING, CASING AND CASING & TUBING SIZE	CEMENTING RECORD DEPTH SET	SACKS CEMENT	
HOLE SIZE	CASING & TOBING SIZE	DLI III OLI	5,1010 22.12.17	
V. TEST DATA AND REQUE	ST FOR ALLOWABLE			
OIL WELL (Test must be after)	recovery of total volume of load oil and mus	t 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 l.	ift, etc.)	
L of Total				
Length of Test	Tubing Description	Casing Pressure	Choke Size	
	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Tubing Pressure Oil - Bbls.	Casing Pressure Water - Bbls.	Choke Size Gas- MCF	
GAS WELL	Oil - Bbls.	Water - Bbls.	Gas- MCF	
GAS WELL	Oil - Bbls.	Water - Bbls.	Gas- MCF	
GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC	Oil - Bbls. Length of Test Tubing Pressure (Shut-in) CATE OF COMPLIANCE	Water - Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Gas- MCF Gravity of Condensate	
GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.)	Oil - Bbls. Length of Test Tubing Pressure (Shut-in) CATE OF COMPLIANCE plations of the Oil Conservation in that the information given above	Water - Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSER	Gas- MCF Gravity of Condensate Choke Size	
GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regulation have been complied with and is true and complete to the best of my	Oil - Bbls. Length of Test Tubing Pressure (Shut-in) CATE OF COMPLIANCE plations of the Oil Conservation in that the information given above	Water - Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSER Date Approved	Gas- MCF Gravity of Condensate Choke Size EVATION DIVISION JUL 0 7 92	
GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regulation have been complied with and is true and complete to the best of my	Oil - Bbls. Length of Test Tubing Pressure (Shut-in) CATE OF COMPLIANCE allations of the Oil Conservation in that the information given above knowledge and belief. Technical	Water - Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSER Date Approved	Gas-MCF Gravity of Condensate Choke Size RVATION DIVISION JUL 0 7 92	
GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regulation have been complied with and is true and complete to the best of my	Oil - Bbls. Length of Test Tubing Pressure (Shut-in) CATE OF COMPLIANCE allations of the Oil Conservation in that the information given above knowledge and belief. Technical	Water - Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSER Date Approved	Gas-MCF Gravity of Condensate Choke Size EVATION DIVISION JUL 0 7 92	

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.