District I PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

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

District II 20 Drawer DD, Artesia, NM \$8211-0719

OIL CONSERVATION DIVISION

MA KIN DLIMBS KU	L., Aztec,	NM 87410		Santa	PO Box Fe, NM	2000 8750≥	1-2088					5 Copi	
istrict IV O Box 2088, Santa	Fe, NM	87504-2088			2 0, 111/2	0750	. 2000	'			AME	NDED REPOR	
<u>.</u>						D AU	THOI	RIZATI	ON TO T	RANSP	ORT		
Operator name and Address Limark Corporation P.O. Box 10708										² OGRID Number 152527 ² Reason for Filing Code			
*API Number 30 - 0 43-20944			'Pool Name WC; 20N4W27J Entrada						* Pool Code 96773				
' Property Code			' Property Name						' Well Number				
2220		T		deral 2	/						1		
	ction	Location Township		Lot.ida	Feet from	the	North/S	outh Line	Feet from the	East/We	st line i	County	
J 27 2		20N	4W		1	1395 Sou			th 1575		t	Sandoval	
¹¹ Bot	ttom	Hole Loc	ation		<u> </u>		L				1		
UL or lot no. Section		Township	Range	Lot Ida	Feet from	the	North/	South line	Feet from the	East/We	st line	County	
12 Lae Code 13	Produci	ng Method Co	ode 14 Gas C	onnection Da	te 1 1 C.	129 Pares	ut Numbe		C-129 Effective	Data	17 C 1	29 Expiration Date	
F		Р				149 Feri	ш (чошое		C-129 Extective	Date	C-1	29 EXPERIENCE DEM	
II. Oil and		Transpor		,									
OGRID		17 Transporter Name and Address				²⁴ POD		22 POD ULSTR Location and Description					
		Giant Refining Co.			2	2822404		0					
		111 County Road 4990 Bloomfield, NM 87413			2000	/		******					
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V. Produce	ed Wa	ater			*****	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	****		** **				
" POE	D				2	POD U	LSTR Loc	ation and I	Description				
282240			27 20N	4W									
/. Well Co		tion Data	¹⁴ Ready Da										
12/22/97			02/27/98			" то 6100 '			" PBTD 6100 '			Perforations	
M Hole Size			31 Casing & Tubing Size			1		¹¹ Depth Se				S Cement	
12 1/4"			9 5/8" J55 36#					324	' 225 sx C1 B			В	
8 3/4"			7" CF95 23# & 26#			6033			' 1725 sx C		x C1	B & C1 H	
			2 7/8" J-55 6.5#			3052			1 1/5				
/I. Well Te			elivery Date	<u> </u>	- D		n					W.C T	
02/28/9		None W Test Date "Test			7 Test Length8 24 hrs		M Tbg. Pressure		" Cag. Pressure				
" Choke Size		4	41 Oil		4 Water		Gas		" AOF		" Test Method		
		<u> </u>			224	0					Pumping		
" I hereby certify the with and that the in-	that the n formation	iles of the Oil	Conservation Di	vision have be	een complied at of my			וו כס	NSERVA'	ע מטוז	IVIC	ION	
knowledge and belie Signature:	4///	H M	7		Ť	Anne	ed hv·		NSERVA'				
Printed name:							Approved by: SUPERVISOR DISTRICT #3						
Mark A. Philpy													
	<u>resid</u> 3/30/		Phone: 01	15/684-5	5765				MAY	<i>ত</i> ।সস	J		
a If this is a chan						نسب							
													
P	revious (Operator Sign	ature			Pris	ted Name			Tia	le -	Date	

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple

Improperly filled out or incomplete forms may be returned to operators unapproved.

- Operator's name and address 1.
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested) uested)

If for any other reason write that reason in this box.

- The API number of this well 4.
- The name of the pool for this completion 5
- The pool code for this pool 6.
- The property code for this completion
- The property name (well name) for this completion 8.
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- The bottom hole location of this completion 11.
- Lease code from the following table: 12

Federal State Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table: 13.

Flowing Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a 14. gas transporter
- The permit number from the District approved C-129 for this completion 15.
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR of the expiration of C-129 approval for this completion
- The gas or oil transporter's OGRID number 18.
- Name and address of the transporter of the product 19.
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table: 21.

- The ULSTR location of this POD if it is different from the 22. well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.)
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water 24. Tank ,etc.)
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce
- Total vertical depth of the well 27.
- Plugback vertical depth 28.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. Inside diameter of the well bore
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and 32.
- Number of sacks of cement used per casing string 33.

The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- 34. MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 35.
- MO/DA/YR that the following test was completed 36.
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- 39. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- Diameter of the choke used in the test 40.
- 41. Rarrels of oil produced during the test
- Barrels of water produced during the test 42.
- MCF of gas produced during the test 43.
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well:

F Flowing
P Pumping
S Swabbing
If other method please write it in.

- The signature, printed name, and title of the person authorized to make this report, the date this report was igned, and the telephone number to call for questions about this report 46.
- The previous operator's name, the signature, printed name and title of the previous operator's representative authorized to verify that the previous operator no longe operates this completion, and the date this report was signed by that person 47.