District I PO Box 1986, Hobbs, NM \$2241-1986 District II

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994 back ffice

| District III | | VM 88211-071: ic, NM 87410 | • : | OIL CON | PO | Box 208 | ጸ | | Sub | mit to App | Instructions on back ropriate District Office 5 Copies | | |
|----------------------------------|----------------------------------|-------------------------------|-------------------------|---------------------|-------------------------------------|-------------------------|---|-------------|----------------------|--|--|--|--|
| | Santa Fe, N | M 87504-2088 | | | | NM 8750 | | | | | AMENDED REPORT | | |
| I. | I | REQUES' | T FOR | ALLOWA | BLE | AND A | UTHO | RIZAT | TON TO T | | | | |
| NM8 | | | | | 1 OGRID Number 015938 | | | | | | | | |
| 6 I Tul | 0 | | | | ³ Reseas for Filing Code | | | | | | | | |
| | 'API Number | | | | | | | | | | СН | | |
| 30 - 0 39-23110 | | | Gavi1 | an-Gree | 'Pool Name rn-Graneros-Dako | | | ·+- | ' Pool Code | | | | |
| ' Property Code | | | · · · · · · | | Property Name | | | oca | ta 27192 | | | | |
| | II. O01971 II. Ourface Location | | | | Janet | | | ···· | | #1 | | | |
| Ul or lot no. | Section | Township | Range | Lot.Ida | Foot | from the | North/S | outh Line | Feet from the | East/West I | G. | | |
| A | 27 | 25N | 2W | | 7 | 90 | Nor | th | 790 | East | | | |
| UL or lot so. | 11 Bottom Ho | | | | Part 6 | | | | | Last | Rio Arriba | | |
| | or lot so. Section Towns | | A. Lange | Locida | Foot | Feet from the No | | outh fine | Fost from the East/W | | ne County | | |
| 12 Lee Code | 13 Producis | Method Coc | ' Ga | Connection Date | | 15 C-129 Perm | t Number | 16 | C-129 Effective D | ate 17 | C-129 Expiration Date | | |
| III. Oil au | od Goo 7 | <u>Гъзга</u> | | | | | | | | | | | |
| Transporter "Transporter Name | | | | | | | | | | | | | |
| OGRID | | | and Addre | | 10b = 0/G | | ²² POD ULSTR Location and Description | | | | | | |
| _0 0507 3 | . , | Desta | ₽nc. Driv | EPG e, #550 | E | | | G | | | | | |
| 00000 | Mj | diand, ant Re | Texa | s 797.05 | | | | | | | | | |
| 009018 | | | | 0 | | | · | | | | | | |
| | Fa | 0. Box | on, N | M 87499 | | | | | | | | | |
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| | | | | | L | | | | | | | | |
| IV. Produc | and Water | | | | | | | | | IE(CI | EIWEIN | | |
| PC | DD Wall | <u> </u> | | | | " POD ULS | TR I acette | d D | | JUL | | | |
| | | <u> </u> | | | | | A Decade | 4 490 1/6 | cription | | 2 4 1083 | | |
| V. Well Co | ompletio | 40 | | | | | (0) | | | | | | |
| 3,44 | | | 14 Ready Date | | | " TD | | " PBTD | 1008 | DIST Terforations | | | |
| 34 | M Hole Size | | 11 Casing & Tubing Size | | | ²² Depth Set | | | | | | | |
| | | | | | | | | | | Sec | ³⁰ Sacks Coment | | |
| | 1 | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| I. Well To | est Data | | | | | | | | | | | | |
| Date New | | M Gas Deliver | y Date | * Test Di | ıle | 37 7 | est Length | | H Thg. Pressu | | | | |
| " Choke Si | | | I "Water | | | | | rog. Fremu | Te | ²⁶ Cag. Pressure | | | |
| Cuoke St | | "Oil | | | | | ⁴ G≥ | | " AOF | | 4 Test Method | | |
| I hereby certify the in the in | hat the rules of | of the Oil Conse | rvation Divi | sion have been con | nplied | | | | | | | | |
| nowledge and belie | | a above is true | and comple | te to the best of m | y | | OIL CONSERVATION DIVISION | | | | | | |
| | ignature: | | | | | | Approved by: 37, \$ | | | | | | |
| rinted name: arry D. itle: | | Title: SUPERVISOR DISTRICT #3 | | | | | | | | | | | |
| residen | | Approval Date: JUL 2 4 1995 | | | | | | | | | | | |
| oate: 7/18/9 If this is a change | 95 e of operator | fill in the OC | 1000c: (918 | 3) 584–3 | 802 | | | | 76 × 16 | | | | |
| |)-M(+ | Lerle | | | | R. Gre | _ | D | oid | 7/0:/- | | | |
| M | evious Opera | tor Signature | h | | | Printed Na | | rre | sident | 7/21/95 Tide | Date | | |
| <u>cee</u> | CKK | | MI | e e | | | | | | | - - | | |

New Mexico Oil Conservation Division C-104 Instructions

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 completion.

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

- 1. Operator's name and address
- 2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- 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) request for test ellowable (include vi-requested)

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

- 4. The API number of this well
- The name of the pool for this completion 5.
- 6 The pool code for this pool
- The property code for this completion
- 8. The property name (well name) for this completion
- 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. H the
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:

Federal State Fee Jicarilla

Navajo Ute Mountain Ute Other Indian Tribe

- The producing method code from the following table:
 F Flowing
 P Pumping or other artificial lift 13.
- MO/DA/YR that this completion was first connected to a
- 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 17.
- 18. The gas or oil transporter's OGRID numb
- 19. Name and address of the transporter of the product
- 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: O Oil G Gas 21.

- 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", "Jones CPD", etc.) 22.
- 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. 23.
- 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 Tank", etc.) 24.
- MO/DA/YR drilling commenced 25.
- 26. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well
- 28. Plugback vertical depth
- 29. Top and bottom perforation in this completion or casing ahoe and TD if openhole
- 30. Incide diameter of the well bore
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and 32.
- Number of sacks of cement used per casing string

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.

- MO/DA/YR that new oil was first produced 34.
- 35. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 36.
- 37. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- 41. Barrels of oil produced during the test
- 42. Barrels of water produced during the test
- MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- 45. 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 signed, 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 pravious operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 47.