District I PO Bc^{-, *}980, Hobbs, NM 88241-1980

District II 811 South First, Artesia, NM 88210

District III 1000 RioBrazos Rd., Aztec, NM 87410

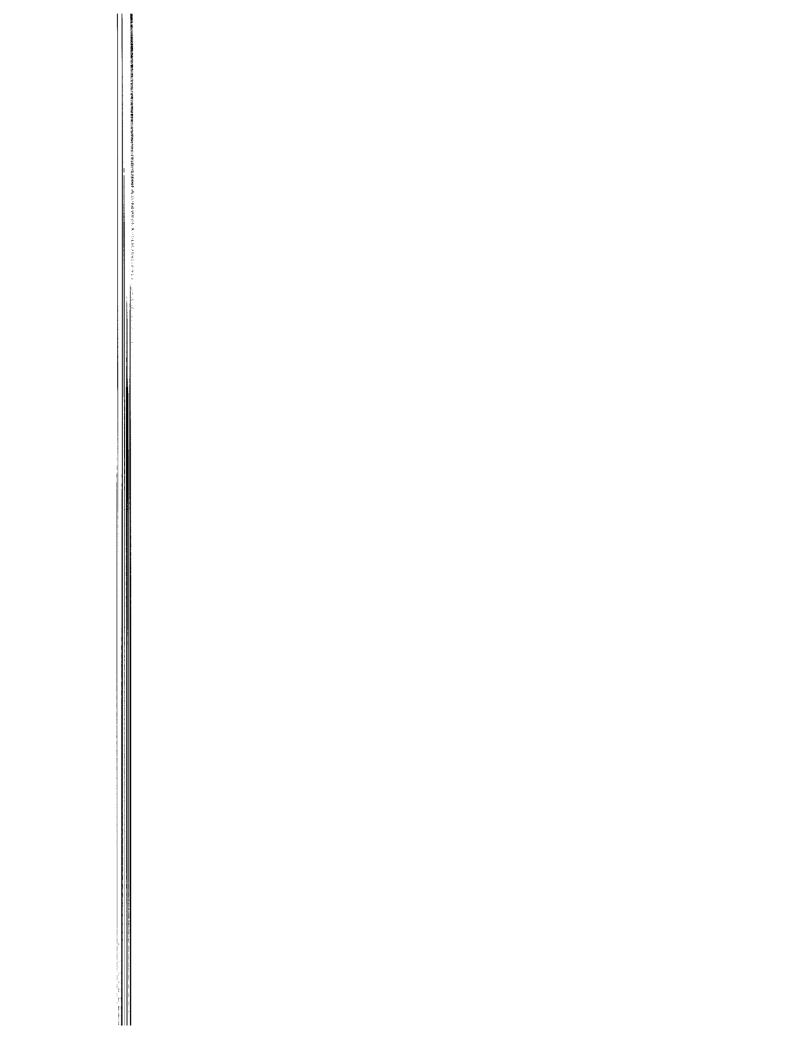
State of New Mexico Engery, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

TOIM C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

AMENDED REPORT

District IV 2040 South Pached			·	** 0337.4	TOTAL AND	ти~ Д∶	TAND	ਗਿ⊙ਾ∆ ਜ	ግ ፖኤት ፐብ ፐ	D ANICD	ОРТ	
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	PI Number			PAC		Pool Na	me					ol Code 1599
	045-24880 perty Code	1			IN DAKOTA	operty N	zme				9 Well Number	
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31 Hole Size	e		32 Casing	and Tubing S	lize		33 De	pih Set	3-	Sac	ks Cemer	nt
						<u></u>						· · · · · · · · · · · · · · · · · · ·
VI. Well	Test Dat	ta										
35 Date No		36 Gas Deliver	y Date	³⁷ Test I	Date	38	Test Length		³⁹ Tbg. Pre	ssure	40	Csg. Pressure
41 Choke S	Size	⁴² Oil		43 Wal	ter		44 Gas		45 AG	OF	46	Test Method
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Printed Name:	VALUE Vaughn	O. Vennerberg		THE		Title			ervisor District	#3		
Title:		President-Lan		$\rightarrow \rightarrow$		∤ }	oval Date:		31 41301 2.13			
	December 1			(505) 632-5	5200							
		rator fill in the O				ous opera	ator	An	noco Productio	n Compan	y O	GRID# 000778
		<u> / (5/) </u>			Gail Jeffer			Senio	or Administrativ		ssistant	12/01/97 Date
	Previ	ious Operator Signa	ature		Printed Na	ame			Litie	1		Late



Disti PO Box (780, Hobbs, NM 88241-1980

State of New Mexico

Engery, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

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District III 1000 RioBrazos Rd., Aztec, NM 87410

District IV 2040 South Pacheco, Santa Fe, NM 87505

AMENDED REPORT

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4 API Number				POHER KUTZ	ool Name		1	ool Code 77200
30 0 4 3 2 1 3 3 3					perty Name	9 Well Number		
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¹⁰ Surface Lo	cation	-						
or lot no. Section	Township	Range	Lot.Idn	Feet from th	1		East/West line	County
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or lot no. Section	Township	Range	Lot.Idn	Feet from the	he North/South Line	reet nom die	Last west line	County
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New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED TAMENDED 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
- 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 (Include the effective date.)

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)

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

- 4. The API number of this well
- 5. The name of the pool for this completion
- 6. The pool code for this pool
- 7. 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. 10. Otherwise use the OCD unit letter.
- 11. The bottom hole location of this completion
- Lease code from the following table:
 F Federal
 S State
 P Fee
 J Jicarilla 12.

Federal State Fee Jicarilla

NU

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 gas transporter 14.
- 15.
- The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 16.
- 17. MO/DA/YR of the expiration of C-129 approval for this
- 18. The gas or oil transporter's OGRID number
- 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.)
- 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
- 27. Total vertical depth of the well
- Plugback vertical depth --
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore. 30.

- Inside diameter of the well bore 31.
- 32. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and
- Number of sacks of cement used per casing string

If 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 35.
- MO/DA/YR that gas was first produced into a pipeline 36.
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41. Diameter of the choke used in the test
- 42. Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 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 47.
- 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 longer operates this completion, and the date this report was signed by that person 48.