District I

1625 N. French Dr., Hobbs, NM 88240

District II

Form C-104 Revised March 25, 1999

811 South First District 111	·		2040 South				есо	)N	Sul	Submit to Appropriate District Offic 5 Copie			
1000 Rio Brazo District IV	s Rd., Aztec,	NNI 87410		San	ita Fe, N	IM 875	505			Г	7	ENDED REPOR	
2040 South Pac		-	POD A	t t OULA DI		> 4 T I/M	110017	A MITO	NI TO TO A	Nano		EMPED KELOK	
l.	<u>K</u>			LLOWABI		JAUI	HORIZA	AHO	IN TOTRA		KT ID Numb	er	
			-	AYNARD OIL COMPANY					33016				
		1 0808		L EXPRESSWAY .S, TX 75206				Reason for Filing Code CH EFFECTIVE 11/1/99					
4,	API Number		<sup>5</sup> Pool Na				inie				* Pool Code		
30 - 025-01415			CORBIN ABO				<del></del>				13150		
25547	roperty Code 1 <del>9615</del>		Property Nam STATE 35								Well Number 001		
II. 10 S	Surface I	Location										· · · · · · · · · · · · · · · · · · ·	
Of or lot no. Section M 35		Township 17S	Range 33E	Lot.Idn	Feet from the 760		North/South Line S		Feet from the 330	East/W W	est line	County LEA	
11	Bottom I	Hole Loca	tion				•		·				
UL, or lot no.	Section	Township	Range	Lot Idn	Feet fron	ı (lıe	North/South line		Feet from the	East/W	East/West line Cou		
11 Lise Code S	11 Lise Code 12 Producing Method		Code 4 Gas Connection Date		te 15 C	15 C-129 Permi			16 C-129 Effective Date		17 C-129 Expiration Date		
III. Oil ar	nd Gas T	ransporte	rs										
<sup>(1</sup> Transporter   OGRID			"Transporter Name and Address			<sup>26</sup> POD <sup>21</sup> O/G			11 POD ULSTR Location and Description				
009171		GPM GAS CORP., 4044 PENBROOK				1544730 G						11	
		ODESSA, TX 79762											
21778		SUNOCO, IN	IC., 1004 N I	BIG SPRING #57	15	25447	10	0					
		NI)	IDLAND, T	X 79701									
ST TO THE			- 1 1										
					445		aronia i	A STATE					
IV Dual	and Wat				in the second	أستنف والمستنف			<u></u>				
IV. Prodi	ron	er	-			<sup>14</sup> POD III	STR Location	n and D	escription				
2544750													
V. Well (	Completi	on Data											
<sup>25</sup> Spud Date 4/1/62		<sup>16</sup> J.	Ready Date 5/27/62		TTD at 1		<sup>18</sup> PBTD		19 Perforations		<sup>30</sup> DHC, MC		
<sup>11</sup> Hole Size			11 Casing & Tubing Size			11 Depth Se				34 Sack	s Cement		
							· · · · · · · · · · · · · · · · · · ·	<del></del>			· · · · · · · · · · · · · · · · · · ·		
L VI. Well	Test Dat	a	<u> </u>									<u> </u>	
35 Date New Oil		34 Gas Delivery Date		<sup>37</sup> Te	est Date	38 Test Length		gth	<sup>19</sup> Tbg. Pressure		41 Csg. Pressure		
4 Choke Size		42 OH		43 \	43 Water		<sup>44</sup> Gas		<sup>45</sup> AOF			46 Test Method	
with and that t	he information	n given above is	nservation D true and com	pivision have been applete to the best o	complied of my	Approve		L CC	ONSERVA Opadi	LION I	DIVIS	ION	
Printed name: CASSONDRA FOSTER							Title: George						
Title: MANAGER LAND AND MARKETING							Approval Date:						

State of New Mexico Energy, Minerals & Natural Resources

QUESTAR EXPLORATION AND PRODUCTION COMPANY Previous Operator Signatur **Printed Name** G. L. NORDLOH

 $^{lpha}$  If this is a change of operator fill in the OGRID number and name of the previous operator

Phone 214-891-8461

Date: 11/13/99

023846

Title PRESIDENT AND CEO

Date 11/12/99 F 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 despened 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.

separate C-104 must be illed for each pool in a multiple completion.

improperly illied 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.
- Reneon for filling code from the following table:
  NW New Well
  RC Recompletion
  CH Change of Operator 3.
  - Change of Operator
    Add oil/condensate transporter
    Change oil/condensate transporter
    Add gas transporter Ç0

  - ÃĞ CG RT Change gas transporter
    Request for test allowable (include volume requested)

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 Б.
- The pool code for this pool G.
- The property code for this completion 7.
- The property name (well name) for this completion 8.
- The well number for this completion 9,
- 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 gode from the following table: 12.
  - Federal State 8
  - P Fee
  - Joarlia

  - Navajo Uta Mountain Uta Other Indian Triba
- The producing method gode from the following table: 13.
  - Pumping or other artificial lift
- MO/DA/YR that this completion was lirst connected to a 14. gas transporter
- The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 16.
- MOJDAJYR of the expiration of C-129 approval for this 17. completion
- The gas or oil transporter's OGRID number 10.
- 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.
  - Oll O O
- 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 end a short description of the POD [Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.] 24.
- MO/DA/YR drilling commenced 25.
  - MADIDATER this completion was ready to produce

bollom.

Number of eacks 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.

- 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 38.
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- Diameter of the choke used in the test 40.
- Barrels of oil produced during the test 41.
- 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: 45. Flowing Pumping Swabbing If other method please write it in.
- The signature, printed name, and this 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 48.
- 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 47. signed by that person

MIL CO Received