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

District II

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

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

district IV 040 South Pach	ieco, Santa	Fe, NM 8750	5	•		•					<u> </u>	AME	NDED REPO	ORT	
	F	REQUES				<u>E ANI</u>	AUT	THORI:	ZATIO	ON TO TR					
*Operator name and Address RICE OPERATING COMPANY 122 WEST TAYLOR										<sup>2</sup> OGRID Number 019174					
122 HOBI								Reason for Filing Code -1-98							
<sup>4</sup> API Number						* Pool Name AN ANDRES					0	<b>4 Pool Code</b> 096121			
'Property Code 009613 HOBBS SWD						¹ Pro	Property Name				0	* Well Number 016			
		Location	<u> </u>	1101	עשט טשט	<del> </del>		<del></del>	<del></del>			10	<del></del>		
Ul or lot no. Section P 1		Township 6 195		Range 38E	Lot.Idn	Feet from 6	ihe	North/So		Feet from the 660	East/West line		<b>County</b> . 25		
<sup>11</sup> Botto		Hole Loca		on							·				
UL or lot no.	Section	Township	)	Range	Lot Idn	Feet from	the	North/So	uth line	Feet from the	East/W	est line	County		
12 Lse Code P		cing Method SWD	Code	<sup>14</sup> Gas	Connection Date	15 C-	129 Perm	it Number	10	C-129 Effective	Date	17 C-1	129 Expiration D	ate	
III. Oil and Gas Transporters															
18 Transpo OGRID		<sup>19</sup> Transporter Name and Address					<sup>24</sup> POD <sup>21</sup> O/G			<sup>22</sup> POD ULSTR Location and Description					
037008		JENEX OPERATING				28	2809385 0								
		PO BOX 308 HOBBS, NM 88241					1 4 1 1 2 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1								
012426		SKEY OILFIELD SERV. IN				2809385 0									
		PO BOX 580 HOBBS, NM 88241													
130908								85	0						
		PO BOX 1008 HOBBS, NM 88241						4	100						
IV. Prod	uced V	/ater	<del></del>							ł	<u> </u>		· · · · · · · · · · · · · · · · · · ·		
	POD					2	POD U	LSTR Loca	tion and I	Description					
V. Well	Comple	etion Da	ta												
25 Spud Date		24 Re		dy Date		" TD		2ª PBTD		2º Perfor	ations	ons <sup>31</sup> DHC, DC,MC		;	
31 Hole		e Size		32	Casing & Tubin	g Size	<sup>23</sup> Depth		Depth S	et	·····	34 Sacks Cement			
		· · · · · · · · · · · · · · · · · · ·	+												
VI. Well	Test I	Data	<u>-</u> -1												
35 Date New Oil		<sup>34</sup> Gas Deliv		very Date 37 Te		st Date		<sup>34</sup> Test Length		" Tbg. Pressure			46 Csg. Pressure		
41 Choke Size		<sup>42</sup> Oil		43 Water			44 Gas		4 AOF			44 Test Method	i		
<sup>47</sup> I hereby cer with and that t knowledge and	the informat	rules of the O	il Con	servation I ue and con	Division have been aplete to the best of	complied of my		C	OIL CO	ONSERVA'	ΓΙΟΝ	DIVI	SION		
Signature:		h/h			<del>.</del>		Appro	ved by:	ORIGIN	IAL SIGNED I	BY CHR	IS WIL	LIAMS		
Printed name:	Ke	en Haste	n				Title:			DISTRICT IS					
Tide: General Manager							Approval Date:			AUG 1	AUG 1 6 1998				
Date:				Phone:		3-9174	<del></del>								
41 If this is a	change of	operator fill i	n the (	OGRID no	ımber and name	of the prev	ious oper	rator							
	us Operator S	ıre	-	Prin	Printed Name				Title Date						

## New Mexico Oil Conservation Divisi C-104 Instructions

## 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 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.
- Reason for filing code from the following table: NW New Well RC Recompletion 3.

NW RC CH

Change of Operator (Include the effective date.)
Add oil/condensate transporter
Change oil/condensate transporter

AO CO AG CG

Add gas transporter
Change gas transporter
Request for test allowable (Include volume RT 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. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:

State

Fee ... Jicarilla

Navajo Ute Mountain Ute Other Indian Tribe

- 13. The producing method code from the following table: Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a gas transporter 14.
- The permit number from the District approved C-129 for this completion 15.
- 16. MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this 17. 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.

Oil Gas G

- 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 24. (Example: Tank",etc.)
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well 27.

- 31. Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and

34 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 t. total volume of load oil is recovered.

- 35 MO/DA/YR thut new oil was first produced
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- 39. Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
- 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
- 45. Gas well calculated absolute open flow in MCF/D
- 46. The method used to test the well:

Flowing Pumping 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 47. about this report
- 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.