

District I
1625 N. French Dr., Hobbs, NM 88240

District II
811 South First, Artesia, NM 88210

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised June 1, 2000

Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address POOL Company TEXAS P O Box 5208 Hobbs New Mexico 88240		² OGRID Number 170966
⁴ API Number 30 - 0 25-2378	⁵ Pool Name SWD San Andres	³ Reason for Filing Code/ Effective Date Skin 0.1 - 600 BBL/s
⁷ Property Code 00007	⁶ Property Name STATE AB SWD	⁸ Pool Code 96121
		⁹ Well Number 1

II. ¹⁰ Surface Location

UL or lot no. C	Section 3	Township 19S	Range 37E	Lot Idn 3	Feet from the 660	North/South Line North	Feet from the 1980	East/West line west	County lea
--------------------	--------------	-----------------	--------------	--------------	----------------------	---------------------------	-----------------------	------------------------	---------------

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Lse Code S	¹³ Producing Method Code SWD	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
037008	JENEX OPERATING 11100 S Hwy 18 HOBBS NM	2808464	0	3-19-37E

IV. Produced Water

²³ POD 2808464	²⁴ POD ULSTR Location and Description
------------------------------	--

V. Well Completion Data

²⁵ Spud Date 5-25-71	²⁶ Ready Date	²⁷ TD 8170	²⁸ PBTD 5700	²⁹ Perforations 4897-4919	³⁰ DHC, MC
³¹ Hole Size 11	³² Casing & Tubing Size 8 5/8	³³ Depth Set 1680	³⁴ Sacks Cement 475		
7 7/8	5 1/2	7045	725		

VI. Well Test Data

³⁵ Date New Oil	³⁶ Gas Delivery Date	³⁷ Test Date	³⁸ Test Length	³⁹ Tbg. Pressure	⁴⁰ Csg. Pressure
⁴¹ Choke Size	⁴² Oil	⁴³ Water	⁴⁴ Gas	⁴⁵ AOF	⁴⁶ Test Method

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Freeman Young*
Printed name: Freeman Young

Title: FIELD SUPERVISOR

Date: 10-19-00 Phone: 505-392-6591

OIL CONSERVATION DIVISION

Approved by: *Chris Williams*
Title: DISTRICT SUPERVISOR

Approval Date: OCT 19 2000

* If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date
-----------------------------	--------------	-------	------

New Mexico Oil Conservation Division
C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "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)
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.
10. 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.
11. The bottom hole location of this completion.
12. Lease code from the following table:
F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe
13. The producing method code from the following table:
F Flowing
P Pumping or other artificial lift
14. MM/DD/YY that this completion was first connected to a gas transporter.
15. The permit number from the District approved C-129 for this completion.
16. MM/DD/YY of the C-129 approval for this completion.
17. MM/DD/YY of the expiration of C-129 approval for this completion.
18. The gas or oil transporter's OGRID number.
19. Name and address of the transporter of the product.
20. 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.
21. Product code from the following table:
O Oil
G Gas
22. 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.).
23. 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.
24. 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.).
25. MO/DA/YR drilling commenced.
26. MO/DA/YR this completion was ready to produce.
27. Total vertical depth of the well.
28. Plugback vertical depth.
29. Top and bottom perforation in this completion or casing shoe and TD if openhole.
30. Write in 'DHC' if this completion is downhole commingled with another completion or 'MC' if there is more than one non-commingled completion in this well bore. Attach actual completed well bore diagram
31. Outside diameter of the casing and tubing.
32. Depth of casing and tubing. If a casing liner, show top and bottom.
33. 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.
34. MM/DD/YY that new oil was first produced.
35. MM/DD/YY that gas was first produced into a pipeline.
36. MM/DD/YY that the following test was completed.
37. Length in hours of the test.
38. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
39. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells
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.
43. MCF of gas produced during the test.
44. 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.
46. 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.