<u>District I</u>
1625 N. French Dr., Hobbs, NM 88240
<u>District II</u>
1301 W. Grand Avenue, Artesia, NM 8821
District III

E-mail Address:

Date:

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January 9, 2017

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State of New Mexico Energy, Minerals & Natural Resources

Form C-104 Revised October 15, 2009

1301 W. Grand Avenue, Artesia, NM 88210 Submit one copy to appropriate District Office District III Oil Conservation Division 1000 Rio Brazos Rd., Aztec, NM 87410 1220 South St. Francis Dr. AMENDED REPORT District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT I. 1 Operator name and Address OGRID Number JAN 1 3 2017 246368 Basic Energy Services, LP ³ Reason for Filing Code/ Effective Date PO Box 1375 RECEIVED 176.24 bbls Skim Oil 12.14.16 Artesia NM 88211-1375 174.91 bbls Skim Oil 12.14.16 ⁴ API Number ⁶ Pool Code 5 Pool Name San Andres SWD 96121 30 - 025 - 27682Well Number **Property Code** 8 Property Name 303235 Lea II. **Surface Location** Ul or lot no. Section Township Range Lot Idn Feet from the North/South Line Feet from the East/West line County 17 **23S** 850 North 950 37E East **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 13 Producing Method 14 Gas Connection 15 C-129 Permit Number ¹⁶ C-129 Effective Date ¹⁷ C-129 Expiration Date Code Date P SWD III. Oil and Gas Transporters 18 Transporter 20 O/G/W 19 Transporter Name **OGRID** and Address 305730 **Lakewood Energy Solutions** NM OIL CONSERVATION ARTESIA DISTRICT JAN 1 1 2017 RECEIVED IV. Well Completion Data ²³ TD ²⁴ PBTD 25 Perforations 21 Spud Date 22 Ready Date ²⁶ DHC, MC ²⁷ Hole Size 28 Casing & Tubing Size ²⁹ Depth Set 30 Sacks Cement V. Well Test Data 31 Date New Oil 32 Gas Delivery Date 34 Test Length 35 Tbg. Pressure 36 Csg. Pressure 33 Test Date 38 Oil 40 Gas 39 Water 41 Test Method 37 Choke Size ⁴² I hereby certify that the rules of the Oil Conservation Division have OIL CONSERVATION DIVISION been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: / Approved by: Printed name: Title Teresa Aguirre Approval Date: Title: Administrator