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

State of New Mexico Energy, Minerals & Natural Resources Dep

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office

District II

PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

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

PO Box 2088 Santa Fe, NM 87504-2088 5 Copies District IV ☐ AMENDED REPORT PO Box 2088, Santa Fe, NM 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address ¹ OGRID Number 122811 PRONGHORN MANAGEMENT CORPORATION Reason for Filing Code P.O. BOX 1772 HOBBS, NM 88241 Chng Gas Trnsporter CG'API Number ⁵ Pool Name Pool Code **30 - 0** 15 - 22624 TRES HOMBRES ATOKA 86423 ⁷ Property Code Property Name ' Well Number 15327 LONGBOX COMM #1 01 ¹⁰ Surface Location Ul or lot no. Section Feet from the Township Range Lot.ldn North/South Line Feet from the East/West line County 20S 24E EDDY 11 Bottom Hole Location UL or lot no. Section Township Lot Ida Feet from the North/South line Feet from the East/West line 12 Lee Code 13 Producing Method Code 14 Gas Connection Date 15 C-129 Permit Number 1 C-129 Effective Date 17 C-129 Expiration Date III. Oil and Gas Transporters Transporter "Transporter Name and Address " POD 11 O/G 11 POD ULSTR Location **OGRID** and Description 147831 AGAVE ENERGY CO. 0499330 G H 30 20S 24E 105 SOUTH FOURTH ST ARTESIA, NM 88210 RECEIVED NOV 27 1995 Produced Water COM POD 14 POD ULSTR Location and Description DIST. 2 Well Completion Data Spud Date 24 Ready Date n TD " PBTD 29 Perforations M Hole Size 31 Casing & Tubing Size 32 Depth Set ¹³ Sacks Cement VI. Well Test Data Date New Oil M Gas Delivery Date " Test Date " Test Length " Tbg. Pressure " Cag. Pressure " Choke Size 41 Oil 4 Gas " AOF " 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 OIL CONSERVATION DIVISION knowledge and belief. Signature: ORIGINAL SIGNED BY TIM W. GUM Approved by: Printed name: DISTRICT II SUPERVISOR SHERRY WADE Title: Approval Date: PROD CLERK DEC 7 1995 Date:

Printed Name

Title

Date

Phone: 392-5516

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

Previous Operator Signature