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

Form C-104 Revised October 18, 1994

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe. NM 87505

State of New Mexico Energy, Minerals & Natural Resources Department

Instructions on back Submit to Appropriate District Office 5 Copies

District IV 2040 South Pac					·	14141 07						ENDED REPOR	
•	R	EQUEST	FOR A	LLOWAE	BLE A	ND AU	JTHOI	RIZAT	ION TO TI				
Torreon Oil Co.									² OGRID Number				
P.O. Box 356 Flora Vista, NM 87415									23334 3 Reason for Filing Code				
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	API Number	5				⁵ Pool Nam			TROM SA	11/11/11/11		Pool Code	
30-043-05065 San Luis Mesa Property Code					nesai	verde					53620		
114			¹ Property Name						* Well Number				
		Location	T(ORREON		·····	·						
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UL or lot no.		Hole Loca	T	Lot Idn	I B . 6								
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12 Lae Code	13 Producir	ng Method Cod	e 14 Gas	Connection Dat	e ¹⁵ (C-129 Perm	it Number		C-129 Effective I) Date	" C-I	29 Expiration Date	
F													
		Fransporte											
Transporter OGRID		15 Transporter Name and Address				21 POD 21 O/G			²² POD ULSTR Location and Description				
9018	·	Grant Refinery				7539	1539610 C						
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. Well C	Completi	on Data									 .		
25 Spud Date		²⁶ Ready Date ²⁷ TD			" TD	21 PBTD		24 Perforati	ons	30 DHC, DC,MC			
31 Hole Size		<u> </u>	32 Casing & Tubing Size			33 Depth Set					34 Sacks	Coment	
											Sacks	Cement	
													
				-1							 -		
													
	Test Dat								L				
Date Ne	w Oil	³⁴ Gas Deliv	ery Date	" Test	Date		Test Len	gth	34 Thg. Pre	sure	•	Csg. Pressure	
41 Choke	Size	42 O	il	43 W	ater	-	44 Gas		45 AOF	<u> </u>			
							Cas		- AOF			* Test Method	
I hereby certify	that the rule	s of the Oil Cor	servation Di	vision have been lete to the best o	complied								
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rinted name: Noel Reynolds						Title: SUPERVISOR DISTRICT # 3							
Noel	ille: Operator						Approval Date: FEB 1 5 1995						
Noel de: Oper	ator					l							
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Noel ide: Opera atc: 2-1	ator 4-95 ange of opera	ator fill in the (Phone: 60	5) 334-9 ber and name o	176 f the prev	ious operate	r						
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New Mexico Oil Conservation Division C-104 Instructions

IF 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
- 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 (Include the effective date.)

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
- The surface location of this completion NOTE: If the 10. 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
- Lease code from the following table:
 F Federal
 S State
 P Fee
 J Jicarilla 12.

NU

Navajo Ute Mountain Ute Other Indian Tribe

13.

- The producing method code from the following table:
 F Flowing
 P Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a 14. gas transporter
- 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
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- 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 Ğ

- 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 Tank", etc.) 24.
- MO/DA/YR drilling commenced 25.
- 26. MO/DA/YR this completion was ready to produce
- 27 Total vertical depth of the well
- Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore. 30

- Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and 33.
- 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 the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced 35.
- 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
- 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 Swabbin
 - S 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 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 48.