

District I
PO Box 1980, Hobbs, NM 88241-1900

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Branos Rd., Aztec, NM 87410

District IV

PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

PO Box 2088

Santa Fe, NM 87504-2088

Form C-104

Revised February 21, 1994

Instructions on back

Submit to Appropriate District Office

5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address BHP PETROLEUM (AMERICAS) INC. P.O. BOX 977 FARMINGTON, NEW MEXICO 87499		OGRID Number 2217
		Reason for Filing Code RECOMPLETION
API Number 30 - 0 45-07076	Pool Name BASIN FRUITLAND COAL	Pool Code 71629
Property Code 2038	Property Name GALLEGOS CANYON UNIT ELEV. 5625' GR	Well Number 49

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
A	31	28N	12W		990	NORTH	892	EAST	SAN JUAN

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
Lse Code 84	Producing Method Code PUMPING	Gas Connection Date ----	C-129 Permit Number N/A	C-129 Effective Date N/A	C-129 Expiration Date N/A				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
7057	EL PASO NATURAL GAS P.O. BOX 4990 FARMINGTON, N.M. 87499	2817055	GAS	

IV. Produced Water

POD 2817054	POD ULSTR Location and Description OIL CON. DIV. DIST. 3
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V. Well Completion Data

Spud Date	Ready Date	TI	PBTD	Perforations
10-05-53	01-11-96	1331'	1272'	1251' - 1267'
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
12 1/4"	8 5/8" 40#	97'	70 SX	
7 7/8"	5 1/2" 14#	1274'	100 SX	
	2 3/8" 4.7#	1267'		

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
*	*	01-04-96	24 HRS	N/A	25
Choke Size	Oil	Water	Gas	AOF	Test Method
3/8"		03 BBL	126	N/A	PUMPING

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:

Printed name:

Title:

Date:

Phone:

OIL CONSERVATION DIVISION

Approved by:

Original Signed by FRANK I. CHAVEZ

Title:

SUPERVISOR DISTRICT # 3

Approval Date:

MAR 11 1996

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

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 11.1.

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 filled for each pool in a multiple
completion.

Improperly filled out or incomplete forms may be returned to
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.

Reason for filling code from the following table:

RT Request for test allowable (Include volume requested)
CG Change gas transporter
AG Add gas transporter
CO Change oil/condensate transporter
AO Add oil/condensate transporter
CH Change of Operator
RC Recompletion
NW New Well

If for any other reason write that reason in this box.

The API number of this well

The name of the pool for this completion

The pool code for this pool

The property code for this completion

The property name (well name) for this completion

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 OGD unit letter.

The bottom hole location of this completion

Lease code from the following table:

F Federal
S State
P Private
J Judicial
N Navajo
Ute Mountain Ute
I Other Indian Tribe

The producing method code from the following table:

P Pumping or other artificial lift
F Flowing

MO/DA/YR that this completion was first connected to a
gas transporter

The permit number from the District approved C-129 for
this completion

MO/DA/YR of the C-129 approval for this completion

MO/DA/YR of the expiration of C-129 approval for this
completion

The gas or oil transporter's OGRID number

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.

Product code from the following table:

MO Oil
G Gas

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 Water", etc.)

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.

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.)

MO/DA/YR drilling commenced

MO/DA/YR this completion was ready to produce

Total vertical depth of the well

Plugback vertical depth

Top and bottom perforation in this completion or casing
shoe and TD if openhole

Inside diameter of the well bore

Outside diameter of the casing and tubing

Depth of casing and tubing. If a casing liner show top and
bottom.

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.

MO/DA/YR that new oil was first produced

MO/DA/YR that gas was first produced into a pipeline

MO/DA/YR that the following test was completed

Length in hours of the test

Flowing tubing pressure - oil wells

Shut-in tubing pressure - gas wells

Flowing casing pressure - oil wells

Shut-in casing pressure - gas wells

Diameter of the choke used in the test

Barrels of oil produced during the test

Barrels of water produced during the test

MCF of gas produced during the test

Gas well calculated absolute open flow in MCF/D

The method used to test the well:

F Flowing
P Pumping
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

MO/DA/YR that this completion was first connected to a
gas transporter

The permit number from the District approved C-129 for
this completion

MO/DA/YR of the C-129 approval for this completion

MO/DA/YR of the expiration of C-129 approval for this
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