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

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 21, 1994 ack ice

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PO Drawer Di District III 1000 Rio Braz District IV	•		OIL CONSERVATION DIVIS PO Box 2088 Santa Fe, NM 87504-2088					Instructions on be Submit to Appropriate District Off 5 Cop					
PO Box 2088,												ENDED REPO	
I.		REQUES	Operator 1	ALLOW	ABLE	AND AT	JTHO	RIZAT	ION TO TI				
Floy				OO7943									
711 Hous				Reason for Filing Code Effective: 11/1/96									
	⁴ API Number									CO-Change Oil Transportator			
30 - 0 25-21749			Inbe P	ermo Pe	Pool Nam	Pool Name			• Pool Code 33660				
7 P	roperty Cod		³ Property Name						' Well Number				
182	61		Farrar	''B''						1		ell Number	
		Location											
Ul or lot no.	Section	Township	Range			from the	North/South Line		Feet from the	e East/West line		County	
0	13 Rottom	Hole Le	33E	<u> </u>	7	66	South		2086	East		Lea	
UL or lot no.	11 Bottom Hole Lo				Foot	Feet from the			E C				
					1	rrom the	North/S	outh line	Feet from the	East/West line		County	
12 Lse Code	13 Produci	ing Method C	ode 14 Gas	Connection	Date	15 C-129 Perm	it Number	10	C-129 Effective I	Date 17 C		129 Expiration Date	
P	P											es publication Date	
III. Oil as		Transpor								<u></u>			
OGRID	ter	<u> </u>	Transporter and Addre			586410 " O/G			22 POD ULSTR Location and Description				
034019 Phil		Phillip	llips Petroleum Co. Truc							0 13 T11S R33E			
	XXXXXXXXXXX	4001 Pe Odessa,		762									
02465				****			0586430 G			0.10 m110 -000			
PO Box			1589	_	0386430	0586430 G			0 13 T11S R33E				
	'	Tulsa, (OK 74102										

V. Produ	ced Wa	ter											
05864.	²⁴ POD ULSTR Location and Description												
V. Well C		on Data) 13 T11	S R33E	<u> </u>			· <u> </u>		
25 Spud Date			24 Ready Da	te		" TD			21 PBTD 20 Perforations				
				İ					2º Perforations				
30 Hole Size			³¹ Casing & Tubing Size			³² Depth Set					33 Sacks Cement		
·· ·· · · · · · · · · · · · · · · · ·								· · · · · · · · · · · · · · · · · · ·					
I. Well T	est Date												
M Date New		a Sas Deli	ivery Date	→ T ₆	est Date	37	Tool I	T					
							37 Test Length		и Tbg. Pressure		3 Csg. Pressure		
44 Choke S	ize	41 (Oil	42 1	Water		43 Gas		4 AOF		45 Test Method		
									Test IV				
I hereby certify-	iliomitation g	of the Oil Co	onservation Div	ision have been	en complied		OII			<u>_</u>			
nowledge and belignature:	ief.		/ :		,		OIL CONSERVATION DIVISION						
inted name:	Approved by:												
tle:	Title: ORIGINAL CYRES OF ARMY CREEDING												
				0.1005		Approval D	Approval Date: nc.T 2.1 1996						
If this is a change of operator fill in the OGRID number and name of the prev													
a tudi	e or obcier	or im in the	OGKLD numb	er and name	of the prev	rious operator							
Previous Operator Signature Printed Name Title											Data		

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.

- Operator's name and address 1.
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- 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.

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

- The API number of this well 4
- The name of the pool for this completion
- The pool code for this pool 6.
- The property code for this completion 7.
- The property name (well name) for this completion 8.
- The well number for this completion 9.
- 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. 10
- The bottom hole location of this completion 11.
- Lease code from the following table: 12.

Federal State

SPJNU

Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table:

F Flowing 13.

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
- Name and address of the transporter of the product 19.
- 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.
 - 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",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.
- MO/DA/YR this completion was ready to produce 26.
- Total vertical depth of the well 27.
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Inside diameter of the well bore 30.
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 32.
- 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. MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 36.
- 37 Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- Barrels of oil produced during the test 41.
- 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:

Flowing

P Pumping Swabbin

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 46.
- 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 47.

