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

PO Drawer DD, Artesia, NM 88211-0719

1000 Rio Brazos Rd., Azlec, NM 87410

District III

Form C-104 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe. NM 87504-2088

State of New Mexico Energy, Minerals & Natural Resources Department

District IV			_	Salita .	re, n	11M1 8 / 3 U	4-2088	S		Г	J AM	ENDED REPO		
I.	Santa Fe,	NM 87504-208 REQUES	8 ST FOR A	ALLOWAI	BLE .	AND AI	JTHOI	RIZAT	ION TO T	– Pans				
7.1			Operator r	ame and Addres	is						ID Num			
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	77002						Reason for Filing Code							
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, b	roperty C	ode	¹ Property Name											
1	8258		Cabot State								1 w	/eli Number		
II. 10		e Location						· · · · · · · · · · · · · · · · · · ·						
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UL or lot no.		Hole Lo		T.	1		·							
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12 Lse Code	13 Produ	ucing Method C	ode 14 Gas	Connection Date		C-129 Panin	nit Number		0.440.700					
S	P					C-127 Term	it Number		* C-129 Effective I	Date	" C-1	129 Expiration Date		
II. Oil a	nd Gas	s Transpor	rters		<u></u>		·				-			
"Transpoi	ter		1* Transporter Name				20 POD 21 O/G			²² POD ULSTR Location				
34019		hillips	Petrole	and Address etroleum Co. Truck			010		and Description					
022628- 4001 Per			ıbrook			<u>0972410</u> 0			I 14 T11S R33E					
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Tulsa,			74102											
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0586050	OD.		4 T11S	R33E		²⁴ POD ULS	TR Locati	on and De	scription			· · · · · · · · · · · · · · · · · · ·		
. Well C	omple	tion Data												
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											reriorations			
36 Hole Size			31 C	asing & Tubing		32 Depth Set			<u></u>	33 Sucks Cement				
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Date Nev		·	livery Date	³ Test I	<u> </u>	- 								
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N/s	nel A	· Me	annon	·L		Approved b	y:	DISTA	igned by Jea NCT I Superv	RY SEX	TON			
inted name:		ANE K. GIANNON -Marketing and	it			Title:			un v	,JUK				
le:		Approval Date:												
le: 							JUN 1 g 1996							
If this is a char	age of ope	rator fill in the	OGRID numb	er and name of t	be previ	ous operator								
F	revious ()	perator Signatu	ıre									l l		
			=			Printed N	вше			Title		Date		

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
- 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.

- The API number of this well 4.
- 5. The name of the pool for this completion
- The pool code for this pool 6.
- The property code for this completion
- 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.
- ease code from the following table: Federal State 12.

LFSPJ

Fee Jicarilla

NU.

Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table: 13.

Flowing
Pumping or other artificial lift

MO/DA/YR that this completion was first connected to a 14.

gas transporter

- 15.
- The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 16.
- 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: O Oil 21.

- The ULSTR location of this POD if it is different from the 22. well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", 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. 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.
- 30. Inside diameter of the well bor
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. $% \label{eq:casing_problem}$ 32.
- 33. 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 34.
- MO/DA/YR that gas was first produced into a pipeline 35.
- 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.
- Diameter of the choke used in the test 40.
- Barrels of oil produced during the test 41.
- 42. Barrels of water produced during the test
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.

45. The method used to test the well:

Flowing Pumping Swabbing

S Swapping
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.

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