## District I PO Box 1980, Hobbs, NM 28241-1980 District U

## State of New Mexico Energy, Minerals & Natural Resources Department

	For	m	C-	104
Revised	February	10	, 1	994
·	netruction		n ł	ack

PO Drawer DD, Artesia, NM \$8211-0719

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

		Revised Feb	rusary iv	J, 177 <del>4</del>
		Instru	ictions o	on back
it	to	Appropriate	District	Office

District III 1000 Rio Brazos Rd., Aztec, NM \$7410

5 Copies

District IV PO Box 2088, S	Santa Fe. N	M 87504-2088			re, inivi		100 A	, <sub>1,12</sub>		2 2 F		ED REPOR			
I.	]	REQUES				U AL	HOR	I A L	ON TO TI	OGRID		<u>,</u>			
Operator name and Address  Collins Oil & Gas Corporation									004889						
P.O. Box 2443 Roswell, NM 88202-2443							СН			Remon for Filing Code 7–1–96					
• ,	'All Number							Pool Name				' Pool Code			
30 - 0 05-	62322			LE RANC	H SAN ANI	ORES	·								
Property Code			1 Prop				me			0	* Well Number				
		245		MABEL		····				8					
II. 10 Surfac		Location				om the North/South Line			Feet from the	East/Wes	East/West line County				
В	30	10-S	28E		330		North		1650	East	Cha	ives			
	Ļ	Hole Lo	cation		<del></del>			ل.ــــــــــــــــــــــــــــــــــــ							
UL or lot so.	Section	Township		Lot Ida	Feet from	the	North/South line		Feet from the	East/West	line	County			
" Lee Code	" Produ	cing Method C	ode 14 Gas	Connection Date	te " C-1	29 Perm	it Number		C-129 Effective	Date	" C-129 E	xpiration Date			
P II Oil a	nd Gas	Transpor	L rters			<del></del>						<u></u>			
Transpo OGRID	rler		1º Transporter Name				"POD "0/G		<sup>13</sup> POD ULSTR Location and Description			•			
02044		Scurlock Pop. 0. Box 4	Permian Corp.			<del>2186010</del> 0		0	Unit P, Sec. 19-10S-28E MABEL BATTERY						
		Houston. T		4648			_		1211.23 1411.		<del> </del>				
					2.	185	930	6							
Aug 1000	_	·-													
· · · · · · · · · · · · · · · · · · ·															
manus a sobr			<del></del>				·	·							
	1 11		<del></del>	<u> </u>			•								
	rop V	valer			и	rod U	LSIR Loca	tion and I	)escription						
	35950		Ur	nit D, Sec.	29-10S-2	28E	Plains	29-9	SWD						
V. Well		etion Date	a												
n St	<sup>13</sup> Spud Date		<sup>12</sup> Ready Date			" τυ			" FBTD		" Perforations				
	" Hole Si	12.	" Casing & Tubing Size		ng Size	<sup>31</sup> Depth		Depth Se	4	0	<sup>10</sup> Sacks Cement				
										Par	Post 70-3				
											-26-96				
						_				-cfr	(p)	<del>/</del>			
						<u>.</u>		· · · · · · · · · · · · · · · · · · ·			1 /				
VI. Well Test Data  **Date New Oil ** Ga			Delivery Date	Date "Test Date		" Test Length		" Tbg. I	Legunte	H Cog. Pressure					
** Choke Size			" Oil	Dil Water		<sup>20</sup> Gas		4	" A	OF	-	Test Method			
with and that	the informa			Division have be complete to the bea			0	IL CC	NSERVAT	TION D	IVISIO	N			
knowledge and belief.  Signature:  Printed name:  ROY D. COLLINS					Approved by: SUPERVISOR, DISTRICT 11										
				Title:											
Title: Pres. Collins						Approval Date: JUL - 3 1996									
Date:	6-26-		Phone:	623-2040			- <u></u> -								
" If this is a	change of	operator fill la	the OGRID :	number and bet	ne of the pres	ious ope									
018198 Pueblo Petroleum Inc. Previous Operator Signature				July 1	KURT A. SOMER PRES. PPI 6-26-96  Printed Name Title						5 Date				
		Optimier of													

E BOX LABLED

## IF THIS IS AN AMENDED REPORT. CHECK "AMENDED REPORT" AT THE TOP OF THIS D

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 Dietrict office. 2.
- Reason for filing code from the following table: NW New Well 3.

NW RCHOOGG AG RT

Recompletion
Change of Operator
Add oil/condensate transporter
Change oil/condensate transporter 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
- The property code for this completion 7.
- The property name (well name) for this completion Я
- 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. 10 Otherwise use the OCD unit letter.
- The bottom hole location of this completion 11
- Lease code from the following table:
  F Federal
  S State
  P Fee
  J Jicarilla 12.

- N N
- Navajo Ute Mountain Ute Other Indian Tribe
- 13 The producing method code from the following table:
  - - Flowing 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
- 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
- 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
  - Oil Gas

- The ULSTR I on of this POD if it is different from the well completed cation 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.
- 27. Total vertical depth of the well
- Plugback vertical depth 28.
- 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 32.
- Number of sacks of cement used per casing string 33.

The following teet data is for an oil well it must be from a teet conducted only after the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gae was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 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
- 41. Barrels of oil produced during the test
- 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 Pumping Swabbing
  - If other method please write it in.
- The eignature, 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 queetions 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.