State of New Morals
Energy, Minerals & Natural Resources Department

Form C-10-617
Revised February 10, 1994 O
Instructions on back O
Submit to Appropriate District Office

District II
20 Drawer DD, Artesia, NM \$8211-0719
District III

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

10 00 Rio Brazo District IV	s Rd., Aziec,	, NM 87410		Santa F	e, NM	8750	4-2088			_		5 Copica	
Astrict IV PO Box 2008, 5	Santa Fe, NM	£ 87504-2088									AME	NDED REPORT	
			FOR A	LLOWAB	LE AN	D AU	THOR	IZAT	ION TO T	RANSP	ORT		
Operator name and Address									¹ OGRID Number				
Limark Corporation									152527				
P.O. Box 10708 Midland, Texas 79702-7708									Resson for Filing Code				
	API Number	- T							CH E	ffectiv			
30 - 005 -				' Pool Name Coyote Queen					* Pool Code 13380				
	roperty Code		Property Name						'Well Number				
7	8799	,	Jackie Federal						1				
I. 10		Location								1			
Ul or lot no.	Section	Towaship	Range	Lot.lda	Feet from	the	North/South Lin South		Feet from the	East/We	et line	County	
J	20	115	27E		1980	0			1980	East	t	Chaves	
11	Bottom	Hole Lo											
UL or lot zo.	1	Township	Range	Lot Ida	Feet from		North/South line		Feet from the		County		
J	20	115	27E		1980		South		1980	East		Chaves	
" Lae Code F	Produc	ing Method C	ode "Gas	Connection Dat	' C	-129 Perm	nit Number	'	C-129 Effective	Date	" C-1	29 Expiration Date	
	nd Gas	<u> </u>	-					l					
II. Oil and Gas Transporters "Transporter Transporter Name							D	21 O/G	" POD ULSTR Location				
OGRID		8053	and Address								and Description		
01403	35		/	,	l l	80679	2						
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	77.77				APR 0 4 1996								
										200	0 (53	000	
4.22/2.74	20.00					. Con. DIV.							
V. Prod	uced Wa	ater				DIST. 2							
13	POD					" POD U	LSTR Loca	tion and	Description	.: <u>-:</u>		<u> </u>	
V. Well													
Spud Date		ļ.	¹⁴ Ready Date			" TD			" PETD		2º Perforations		
	M Hole Size		³¹ Casing & Tubing Size			¹¹ Depth Se					³³ Sacks Cement		
HOIC SUR		: 	-			Depth S	et .	0	A T	A - Z			
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						-				7-	17-	76	
							-	che ap					
77 117 11	m . D					L							
VI. Well	Test Da		Oclivery Date	**	et Date							70.5	
Jan 1154 OH		- 6.51	ACRIVERY DIRE	- 1e	lest Date		" Test Length		M Thg. Pressure			" Cag. Pressure	
" Choke Size			" Oil	41	4 Water		4 Gas		# AOF		-	" Tost Method	
020.				· ·	v auer		- GE		1	OF		1 cm wichted	
" I bereby cer	tify that the n	ules of the Oil	Conservation	Division have bee	sa complied	<u> </u>						<u> </u>	
	pe information			npiete to the best			0	IL CO	NSERVA?	TION D	IVIS	ION	
Signature:		7/4	Ú. –			Approv	red by:	OBION	MAI GIGA:	_			
Printed name:	~ UI	at Dis	-ti			Title:	-	DISTRI	NAL SIGNED ICT II SUPE	BYTIM	W.G	UM	
Mark A. Philpy													
	Presi	dent	1 70	Approval Date: APR 1 2 1996									
	/29/96			15/684-5							-3-4		
	change of op 23312	erster fill in i	ibe OGRID as	mber and name	of the pre-	rious oper		+ Oil	Corporat	ion			
		Operator Sign	atur			Prin	ted Name	10 011	corporat		le-	Date -	
19	m.		L-	<u></u>				Schne	ider	Presid	dent	03/29/96	

IF THIS IS AN AMEND TO 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 bar

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

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
- 5. The name of the pool for this completion
- 6. The pool code for this pool
- The property code for this completion
- The property name (well name) for this completion 8.
- 9. 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 OCD unit letter. 10.
- The bottom hole location of this completion 11.
- 12.

Navajo NU

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 gas transporter 14.

A Sept. Company of the con-

- 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 completion 17.
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product

G .

- 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
 G Gas 21.

's ,

- The ULSTR location of this POD if it is different from time 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
- 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 bore
- 31. Outside diameter of the casing and tubing
- 32. Depth of casing and tubing. If a casing liner show top and
- 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.

- 34. MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas 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
- 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 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.
- 47. The previous operator's name, the signature, printed name, and title of the previous operator's representative 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