District 1 TO Rox 1980, Hobbs, NM 88241-1980 District II			State of New Mexico Energy, Minerals & Natural Resources Department					nt -	Form C-104 Revised October 18, 1994 (W Instructions on back			
811 South First, Artesia, NAT 88210 District III			O	2040	South J	TION DIVISION			Submit to Appropriate District Office			
1000 Rio Brazos Rd., Aztec, NNI 87410 District IV			Santa Fe, NM 87505						AMENDED REPORT			
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If this is a ch	ange of o			-		5 opers	ito:					
" If this is a change of operator fill in the (NGR13) number and name of the p 023067						Karla Johnson			Prora	tion Anal	yst 6/11/96	
	Freeinus	Operato. Signatur-	r		·····	Printe	d Name			Title	Date	
											**# ((1)	

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 deepend 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.

improperty filled out or incomplete forms may be returned to operators unapproved.

1. Operator's name and address

3.

12.

- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- Reason for filing code from the following table;

 NW
 New Well

 RC
 Recompletion

 CH
 Change of Operator (Include the affective date.)

 AO
 Add oil/condensate transporter

 CO
 Change oil/condensate transporter

 AG
 Add das transporter

 - ĂĞ CG RT
 - Add gas transporter Change gas transporter Request for test allowable (include volume requested)
 - If for any other reason write that reason in this box.
- 4. The API number of this well

Б. The name of the pool for this completion

- 6. The pool code for this pool
- 7. The property code for this completion
- 8. The property name (well name) for this completion

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.
- 11. The bottom hole location of this completion
 - Lease code from the following table: F Federal S State P Fee
 - licarilla
 - JNU
 - Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: F Flowing P Pumping or other artificial lift 13.
- 14.
- 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 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
- 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.
- 21. Product code from the following table: O 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",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", "Jones CPD Water 24. (Example: " Tank", atc.)
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- 25. Top and bottom partoration in this completion or casing since and TD if openhole
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore. 30.

- 31. Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 33.
- 34. Number of sacks of cement used per casing string

If the following test nate 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 35.
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39
- 40. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- 41. Diameter of the choke used in the test
- 42. Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44. MCF of gas produced during the less
- 45. Gas well calculated absolute open how in MCF/D
 - The method used to test the well:

46.

- 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 47.
- 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 48.