

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

1980, Hobbs, NM 88241-1980
District II
South First, Artesia, NM 88210
District III
000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Tide West Oil Company 6666 S. Sheridan, Suite #250 Tulsa, OK 74133-1750		² OGRID Number 023067
		³ Reason for Filing Code CG Effective 10/01/95
⁴ API Number 30 - 0 15-22160	⁵ Pool Name Kennedy Farms Upper Penn	⁶ Pool Code 79525
⁷ Property Code 011294	⁸ Property Name Glen Farmer	⁹ Well Number 1

II. ¹⁰ Surface Location

UL or lot no. K	Section 26	Township 17S	Range 26E	Lot.Idn	Feet from the 1980	North/South Line South	Feet from the 1980	East/West line West	County Eddy
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¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Lse Code D	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID 147831	¹⁹ Transporter Name and Address Agave Energy Company	²⁰ POD 2529430	²¹ O/G	²² POD ULSTR Location and Description

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTB	²⁹ Perforations	³⁰ DHC, DC, MC
³¹ Hole Size	³² Casing & Tubing Size	³³ Depth Set	³⁴ Sacks Cement		

VI. Well Test Data

³⁵ Date New Oil	³⁶ Gas Delivery Date	³⁷ Test Date	³⁸ Test Length	³⁹ Tbg. Pressure	⁴⁰ Csg. Pressure
⁴¹ Choke Size	⁴² Oil	⁴³ Water	⁴⁴ Gas	⁴⁵ AOF	⁴⁶ Test Method

⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Karla Johnson

Title:

Production Analyst

Date: 12/14/95

Phone: (918) 488-8962

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

⁴⁸ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

New Mexico Oil Conservation Division
C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "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
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- Reason for filing code from the following table:
NW New Well
RC Recompletion
CH Change of Operator (Include the effective date.)
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
- The name of the pool for this completion
- The pool code for this pool
- The property code for this completion
- The property name (well name) for this completion
- 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.
- The bottom hole location of this completion
- Lease code from the following table:
F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe
- The producing method code from the following table:
F Flowing
P Pumping or other artificial lift
- 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
- MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this completion
- The gas or oil transporter's OGRID number
- 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.
- 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.)
- 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.
- 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.)
- MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce
- Total vertical depth of the well
- Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe 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.

- Inside diameter of the well bore
 - Outside diameter of the casing and tubing
 - Depth of casing and tubing. If a casing liner show top and bottom.
 - Number of sacks of cement used per casing string
- If 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
 - MO/DA/YR that gas was first produced into a pipeline
 - MO/DA/YR that the following test was completed
 - Length in hours of the test
 - Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
 - Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells
 - Diameter of the choke used in the test
 - Barrels of oil produced during the test
 - Barrels of water produced during the test
 - MCF of gas produced during the test
 - Gas well calculated absolute open flow in MCF/D
 - The method used to test the well:
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
 - 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