District I

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

OIL CONSERVATION DIVISION PO Box 2088

State of New Mexico Energy, Minerals & Natural Resources Department

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

000 Rio Brazos istrict IV	Rd., Aztec, N	M 87410		Santa Fe	e, NM 8	7504-2			AMENDED REPORT		
O Box 2088, Se	anta Fe, NM S RF	7504-2088 OUEST	FOR AL	LOWABI	LE AND	AUTI	IORIZAT	ION TO TR	<u> </u>		
•		, c		e and Address			² OGRID Number				
H & S Oil LLC P.O. Box 186 Artesia, NM 88211-0186								009572 * Reason for Filing Code			
ALCOSIG, NA COZIL CICO								СН 1/1/97			
						ol Name		.1	* Pool Code 005130		
30 - 0 15-25012 'Property Code			Red Lake (Queen Grayburg-SA) Property Name						* Well Number		
4847			Muncy Leteral							2	
I. 10 Surface Locatio			n					1 E - 4 f 4 h -	East/West	line County	
Ul or lot no. E	Section 13	Township 17	Range 27	Lot.Idn	Feet from the 1980	ie N	North	Feet from the	West		
Bottom Hole Lo		Iole Loca	tion	L					I		
UL or lot no.	Section	Township	Range	Lot Idn	Feet from t	he N	orth/South line	Feet from the	East/West	line County	
12 Lee Code 13 Producing Met		Method Code	e l ¹⁴ Gas C	Connection Date 15 C		29 Permit Number		" C-129 Effective	C-129 Effective Date 17 C-129 Er		
Fed.											
		ransporte				M non	1 2 0/6		l pop til et	T Leatin	
	"Transporter OGRID		18 Transporter Name and A ldress			* POD	POD "O/G "IF			POD ULSTR Location and Description	
							3 de 1				
							FEB - 4 1997			1907	
IV. Produced Water											
POD POD ULSTR Location and Description											
V. Well	Complet	l ion Data	·								
¹³ Spud Date					" TD	²¹ PBTD		2º Perfor	ations	* DHC, DC,MC	
	31 Hole Size		31 Casing & Tubing Size		Size	33 Depth S		Set		M Sacks Cement	
Hole Size									Port ID-3		
									Ehzip name		
	(m , p				 				•		
VI. Well Test Data ** Date New Oil ** Ga			elivery Date 37 Test		st Date	31	Test Length	34 Tbg. 1	Pressure	4 Cag. Pressure	
41 Choke Size		42	Oil	ii 43 V			44 Gas	45 A	OF	** Test Method	
47 I hereby co- with and that knowledge an	the information	les of the Oil C	Conservation I	Division have been plete to the best	n complied of my	·	OIL C	ONSERVA'	rion di	VISION	
Signature: Talent Manager						Approved by: SUPERVISOR, DISTRICT II					
Printed name: Herbert R. Spencer						Approval Date: EED 5 4007					
Title: Managing Member Phone: 505-746-6658							Approval Date: FEB - 5 1997				
"If this is a change of operator fill of the OCRID number and name of the previous operator											
,, 5		reclear	7 K	1 [] \wedge	cocen	Herb	pert R. S	Spencer	Co-0		
Previous Operator Signature Printed Name Title Date											

New Mexico Oil Conservation Division C-104 Instructions

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.

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) 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.

- 4. The API number of this well
- 5 The name of the pool for this completion
- 6. The pool code for this pool
- 7. The property code for this completion
- В. 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
- 12. Lease code from the following table:

SP

Federal State Fee Jicarilla

NU

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 completion 17.
- 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 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.
- 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
- 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.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 30.

- 31. Inside diameter of the well bore
- Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and
- 34. 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.

- 35. MO/DA/YR that new oil was first produced
- 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 test
- 45. Gas well calculated absolute open flow in MCF/D
- 46. The method used to test the well: Flowing Pumping Swabbin

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.