District I PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico

Revised February 10, 1

3/31/94

Production Clerk

5 Copies

District II PO Drawer DD, Artesia, NM 88211-0719 Instructions on tack OIL CONSERVATION DIVISION District ITI Submit to Appropriate District Office 1000 Rio Brazos Rd., Aztec, NM 87410 PO Box 2088 Santa Fe, NM 87504-2088 District IV PO Box 2088, Santa Fe, NM 87504-2088 AMENDED REPORT REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address Rodney B. Webb ¹ OGRID Number d/b/a Webb Oil Company 36991 P.O. Box 1124 Reason for Filing Code Artesia, NM 88211-1124 ADP - 4 1991 CH API Number Pool Name 30-015-04095 ' Pool Code SQUARE LAKE GRAYBURG SAN ANDRES **Property Code** <u>57570</u> Property Name Well Number FEDERAL 3 10 Surface Location Section Township Range Feet from the Lot.ldn North/South Line Feet from the East/West line E County 06 175 30E 980 NORTH 611 WEST 11 Bottom Hole Location EDDY UL or lot no. Section Lot Ide Feet from the North/South line Feet from the Fast/West line County 13 Lee Code 13 Producing Method Code 14 Gas Connection Date 15 C-129 Permit Number 1 C-129 Effective Date 17 C-129 Expiration Date ₽ Oil and Gas Transporters " Transporter Name " POD OCRID 31 O/G 2 POD ULSTR Location and Address and Description 015694 Navajo Refining Co. 1219610 0 175 29E P.O. Box 159 Artesia, 88211-0159 Produced Water ³ POD M POD ULSTR Location and Description 1219650 A 01 17S 29E Well Completion Data Spud Date 14 Ready Date " TD " PBTD 2º Perforations Hole Size 31 Casing & Tubing Size u Depth Set VI. Well Test Data Date New Oil M Gas Delivery Date " Test Date " Test Length M Tbg. Pressure " Cag. Pressure " Choke Size " Oil Water 4 Gas " AOF " Test Method " I hereby certify the the rules of the Oil Conservation Division have been complied with and that the inf en above is true and complete to the best of my knowledge and beli OIL CONSERVATION DIVISION Signature: Approved by: Printed name: SERVISOR, DISTRICT II Webh Title APR 0.5 1994 Approval Date Date: Phone: (505)748-2081 " If this is a change of operator fill in the OGRID number and name of the previous operator Energy Corporation OGRID: 013837 Previous Operator Signature Printed Name wa Date

Crissa D. Carter

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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.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator

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.

- 4. The API number of this well
- 5 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
- 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
- Lease code from the following table:
 F Federal
 S State
 P Fee
 J Jicarilla 12.

NU

Navajo Ute Mountain Ute Other Indian Tribe

13. 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 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
- 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
 G Gas 21.

- T: e 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", 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
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole
- Inside diameter of the well bore 30.
- 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
- MO/DA/YR that gas was first produced into a pipeline 35.
- 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
- Gas well calculated absolute open flow in MCF/D 44.
- 45. 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 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