

☐ AMENDED REPORT

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

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator Name and Address		2. OGRID Number
SHAHARA OIL, LLC 207 W MCKAY CARLSBAD, NM 88220		143119 3. Reason for Filing Code CH - Effective 07/17/97
4. API Number	5. Pool Name	6. Pool Code
30-015-04377	Grayburg Jackson 7 Rvs-QN-GB-SA	28509
7. Property Code	8. Property Name	9. Well Number
17364	Grayburg Jackson WFU TR ME	1

II. 10. Surface Location

10. Surface Location									
Ut or lot no.	Section	Township	Range	Lot Idn.	Feet From the	North/South Line	Feet From the	East/West Line	County
O	28	17S	30E		990	South	1650	East	Eddy

11. Bottom Hole Location

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
O	28	17S	30E		990	South	1650	East	Eddy
12. Log Code	13. Producing Method Code		14. Gas Connection Date		15. C-129 Permit Number		16. C-129 Effective Date		17. C-129 Expiration Date
F	Water injector								

III. Oil and Gas Transporters

Oil and Gas Transporters				
18. Transporter OGRID	19. Transporter Name and Address	20. POD	21. O/G	22. POD ULSTR Location and Description

A circular stamp with a date range '15262728293031-123456789' around the top edge. In the center, it says 'SEP 1997' with an arrow pointing to the number '3'. Below that, it says 'RECEIVED' and 'OCD - ARTESIA'.

IV. Produced Water

IV. Produced Water		24. POD ULSTR Location and Description
23. POD		

V. Well Completion Data

V. Well Completion Data						
25. Spud Date		26. Ready Date		27. TD	28. PBTD	29. Perforations
30. Hole Size		31. Casing & Tubing Size		32. Depth Set		33. Sacks Cement
						<i>Pot ID-3</i>
						<i>9-26-97</i>
						<i>dy of name</i>

VI. Well Test Data

VI. Well Test Data					
34. Date New Oil	35. Gas Delivery Date	36. Test Date	37. Test Length	38. Tbg. Pressure	39. Cag. Pressure
40. Choke Size	41. Oil	42. Water	43. Gas	44. AOF	45. Test Method

46. 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: Perry L. Hughes
Printed Name: Perry L. Hughes

Title: President

Date:	Phone:
07/31/97	(505) 885-5433

OIL CONSERVATION DIVISION

Approved By:

Approval Date _____
Title: _____

SUPERVISOR, DISTRICT II

SEP 10 1997

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

SHAHARA OIL CORPORATION

Previous Operator Signature

Printed Name _____

Perry L. Hughes

Title

President

Date _____

07/31/97

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State of New Mexico
Energy, Minerals & Natural Resources Department

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

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Shahara Oil Corporation 207 West McKay Carlsbad, New Mexico 88221-3232		OGRID Number 143119
		Reason for Filing Code CH 8-1-95
API Number 30-015-04377	Pool Name Grayburg Jackson 7 Rvs-QN-Gb-SA	Pool Code 28509
Property Code 17364	Property Name Grayburg Jackson WFLAME	Well Number 1

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
0	28	17-S	30-E		990	South	1650	East	Eddy

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
0	28	17-S	30-E		990	South	1650	East	Eddy

Lee Code F	Producing Method Code Water Inj.	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date
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III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description

IV. Produced Water

POD	POD ULSTR Location and Description
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
				Post ID-3
				8-18-95
				chg op

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

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: Perry L. Hughes

Printed name: Perry L. Hughes President

Title: President

Date: 8/4/95 Phone: (505) 855-5433

OIL CONSERVATION DIVISION

Approved by: SUPERVISOR, DISTRICT II

Title: Approval Date: AUG 14 1995

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

Coastal Management Corporation

Previous Operator Signature

Printed Name

Title

Date

J. W. Ramsey

Vice President/Exploration 8/4/95

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.

1. Operator's name and address
2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
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
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
10. 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.
11. The bottom hole location of this completion
12. Lease code from the following table:
F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe
13. The producing method code from the following table:
F Flowing
P Pumping or other artificial lift
14. MO/DA/YR that this completion was first connected to a gas transporter
15. The permit number from the District approved C-129 for this completion
16. MO/DA/YR of the C-129 approval for this completion
17. MO/DA/YR of the expiration of C-129 approval for this completion
18. The gas or oil transporter's OGRID number
19. Name and address of the transporter of the product
20. 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.
21. Product code from the following table:
O Oil
G Gas

22. 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.)
23. 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.
24. 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.)
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
29. Top and bottom perforation in this completion or casing shoe and TD if openhole
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 bottom.
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
38. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
39. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells
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
44. Gas well calculated absolute open flow in MCF/D
45. The method used to test the well:
F Flowing
P Pumping
S Swabbing
If other method please write it in.
46. 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