Submit 5 Copies Appropriate District Office DISTRICT J P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

See Instruction at Bottom of Page

OIL CONSERVATION DIVISION SEP - 1 1992

Losation Provided (periods of periods) Provided (periods) Producing Producing Producing Producing Producing Method (Prov. purp., gas 191, etc.) Producing Method (Prov., purp., gas 191, etc.) Producing Method (Pr	DISTRICT II P.O. Drawer DD, Aitesia, NM 88210	U			P.O. B	ox 2088 exico 8750	04-2088	*	J. D.		Ęº,	
Comment Comm	1000 Rio Brazos Rd., Aztec, NM 87410	REQUE	ST FOF	R AL SPO	LOWAE	BLE AND .	AUTHORIZ TURAL GA	4S	n - o Page			
Content P.O. Box 276, Artesia, NN 88210	Operator		7 11 0 11 1	<u> </u>	<u> </u>			Well A	JI No.			
P.O. BOX 276, Artesia, NN 88210 Change in Transporter of Change in Operate Ed Casinghed Change in Conference Ed Change in Transporter of Change in Operate Ed Casinghed Change in Change		ation 🗸										
Change In Proceedings Change In Transporter of Deep Case	Address P.O. Box 276, Arte	sia, NM	88210									
Description Examples Complete Comple	Reason(s) for Filing (Check proper box)				eter of	Oth	er (Please expla	rin)				
Comparison Description Des				-	1-1	Eff	ective 8,	/1/92				
MATERIAL PROPERTY OF PRINCIPLY COLORS AND PROPERTY COLORS OF THE STATE	Change in Operator KX	Caringhead C	as Co	onden	sate							
IL DESCRIPTION OF WELL AND LEASE Was No. Post Name, Instituting Formation Grbg Jackson SR Q Grbg SA State StorkenskoxStr B-1266	If change of operator give name and address of previous operator Marb	ob Energ	y Corp	ora	tion,	P. O. Dr	awer 217	, Artesi	a, NM 8	88210		
Least Numes Cord Unit 73 Pool Name, Including Formation Crib Sales State State Restriction Pool Color Crib Sales State		AND LEAS	E					Vinda	<u> </u>	i es	se No	
Unit Letter 0 131 Feet From The SOULE Line and 2029 Feet From The RASE Line Section 21 Township 178 Range 29E NNFM. Eddy County U.I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Natural of National Contrasporter of Cantightead Gas Contrasporter of Cantighte	Lease Name G-J West coop Unit Well No. Pool Name, Including 73 Grbg Jacks						ing i officiation			∠		
Section 1 Township 17S Respective Color Condensate Color Condensate Color address to which approved copy of this form is to be said. Navel of Authoritied Transporter of Color Condensate Color address to two which approved copy of this form is to be said. Navel of Authoritied Transporter of Color Condensate Color address to two Authorities (District Authorities) Color Condensate Color address to two Authorities (District Authorities) Color Condensate Color address to Windows (District Authorities) Color address to Which approved copy of this form is to be said) Address (Clive address to which approved copy of this form is to be said) Address (Clive address to which approved copy of this form is to be said) Address (Clive address to which approved copy of this form is to be said) Address (Clive address to which approved copy of this form is to be said) Address (Clive address to which approved copy of this form is to be said) Address (Clive address to which approved copy of this form is to be said) Address (Clive address to which approved copy of this form is to be said) Address (Clive Address to Which approved a part of this form is to be said) Address (Clive Address to which approved copy of this form is to be said) Address (Clive Address to which approved copy of this form is to be said) Address (Clive Address to which approved copy of this form is to be said) Address (Clive Address to which approved to which approved to which approved to w	0	: 131	Fe	et Fro	n The	south Lim	e and2	029 Fee	et From The	_east	Line	
Name of Authorized Transporter of Oil Nava 16 Ref 15 int R. Co. Name of Authorized Transporter of Casinghead Gas S or Dry Gas Authorized Transporter of Casinghead Gas S or Dry Gas Address (Give address to which approved copy of this form to be serial) 4001 Pent Proclete Codes and the Serial S	Section 21 Township	, 17S	Ra	nge	29	E , NI	MPM,		Eddy		County	
Name of Authorized Transporter of Oil Nava 16 Ref 15 int R. Co. Name of Authorized Transporter of Casinghead Gas S or Dry Gas Authorized Transporter of Casinghead Gas S or Dry Gas Address (Give address to which approved copy of this form to be serial) 4001 Pent Proclete Codes and the Serial S	III. DESIGNATION OF TRAN	SPORTER	OF OIL	ANI	D NATU	RAL GAS		ish surroyed	cany of this for	em is to he sen	ı)	
Name of Authorites Transporter of Camplead Gas	Name of Authorized Transporter of Oil	Or	Condensate	ا '		Vooress (Ois						
GPM Corporation ## well produced to liquida, Unit Sec. Twp. Rge tast settably connected? When 7 ## well produced to it liquida, Unit Sec. Twp. Rge tast settably connected? When 7 ### well production of table. ### febt production of table. ### Well Gas Weil Gas Weil Sec. Twp. Rge tast settably connected? When 7 ### Well Workover Deepen Plug Back Same Resv Diff Resv ### Designate Type of Completion - (X) Gil Weil Gas Weil New Well Workover Deepen Plug Back Same Resv Diff Resv ### Date Spekted Date Compl. Ready to Prod. Total Deepth P.B.T.D. ### Date Spekted Date Compl. Ready to Prod. Total Deepth P.B.T.D. ### Total Deepth P.B.T.D. ##	Name of Authorized Transporter of Casinghead Gas						re address to wh	ich approved	copy of this for	rm is to be sen	t)	
If this production is commisgled with that from any other lease or pool, give comminging order number: If this production is commisgled with that from any other lease or pool, give comminging order number: If this production is commisgled with that from any other lease or pool, give comminging order number: If this production is commisgled with that from any other lease or pool, give comminging order number: If this production is commisgled with that from any other lease or pool, give comminging order number: If this production is commisgled with that from any other lease or pool, give comminging order number: If this production is commisgled with that from any other lease or pool, give comminging order number: It could be pool to product in the production of the production is comminged by the production of the production is comminged by the production of the production is comminged by the production of the pr	GPM Corporation	·										
Date Speaked Date Completion - (X) Date Of Producing Formation Top Oil/Cas Pay Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD BACKS CEMENT DEPTH SET SACKS CEMENT Casilly Top - 3 Separative Control of this depth or be for fall 24 hours.) Producing Method (Flow, purp., gas lift, etc.) Date of Test Date	give location of tanks.	i i	i_	·	<u>i</u>			i				
Designate Type of Completion - (X) Date Speaded Date Compl. Ready to Prod. Date Speaded Date Compl. Ready to Prod. Date Speaded Date Compl. Ready to Prod. Total Depth P.B.T.D. Top Oil/Gas Pay Depth Casing Since TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT CASING & TUBING SIZE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas 16f. etc.) Tubing Pressure Casing Pressure Casing Pressure Chicke Size Vaier - Bible. Gas MCF VI. OPERATOR CERTIFICATE OF COMPLIANCE I horely certify that the nates and regulations of the Oil Conservation Division have been complete with and that the information given above is tous and conforme to the control of the control o	If this production is commingled with that I	from any other l	ease or poo	i, give	e commingi	ing order num	оег:					
Date Speaked Date Compil. Ready to Prod. Food Depth First Joseph Tobing Depth Depth Casing Depth Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT ACUAL First New Oil Run To Tank Date of Test Length of Test Actual Frod. During Test Oil - Bbis. CASING Freesure Choke Size Casing Freesure Chief Size Water - Bbis. Condensate/MMCP Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Oil CONSERVATION DIVISION Date Approved Sep 1 1992 By ORIGINAL SIGNED DY MIKE WILLIAMS SUPERVISOR, DISTRICT 19 Title Titl			il Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Elevations (UF, RKB, RT, GR, etc.) Name of Producing Formation TUBING, CASING AND CEMENTING RECORD Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING A TUBING SIZE DEPTH SET SACKS CEMENT Language V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of toad oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Casing Pressure Choke Size GAS WELL Actual Prod. Test - MCIFID Length of Test Actual Prod. Test - MCIFID Length of Test Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) OIL CONSERVATION DIVISION Date Approved SEP 1 1992 Date Approved Title			ready to Pr			Total Depth	<u> </u>	L	P.B.T.D.		L	
Perforations TUBING, CASING AND CEMENTING RECORD ASING & TUBING SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT CASING & TUBING SIZE DEPTH SET SACKS CEMENT CASING & TUBING SIZE V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Taok Date of Test Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Choke Size Casing Pressure Choke Size Casing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and couphple is the best of my knowledge and belief. Signature Signature Title Title	Date Spudded Date Compi. Ready to Frod.											
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT CASING & TUBING SIZE Producing Method (Flow, pump, gas 14), ste) Choke Size OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and countries is the best of my knowledge and belief. Signature Rhonda Nelson Production Clerk Title Signature Rhonda Nelson Production Clerk Title T	Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACRS GEMENT CASING & TUBING SIZE DEPTH SET SACRS GEMENT CASING & TUBING SIZE DEPTH SET SACRS GEMENT CASING A TUBING SIZE DEPTH SET SACRS GEMENT CASING A TUBING SIZE DEPTH SET SACRS GEMENT CASING TEST CASING TEST DEPTH SET SACRS GEMENT CASING TEST CASING MENDAL OF TWICE TEST CASING	Perforations	l				1			Depth Casing	Shoe		
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACRS GEMENT CASING & TUBING SIZE DEPTH SET SACRS GEMENT CASING & TUBING SIZE DEPTH SET SACRS GEMENT CASING A TUBING SIZE DEPTH SET SACRS GEMENT CASING A TUBING SIZE DEPTH SET SACRS GEMENT CASING TEST CASING TEST DEPTH SET SACRS GEMENT CASING TEST CASING MENDAL OF TWICE TEST CASING		TU	BING, CA	ASIN	NG AND	CEMENTI	NG RECOR	D				
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be ofter recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas 1/4, etc.) Casing Pressure Casing Pressure Choke Size Case—MCF Gas—MCF Gas—MCF Gas—MCF Gas—MCF Gas—MCF Gas—MCF Casing Pressure (Shuu-in) Casing Pressure (Shuu-in) Olice Size OIL CONSERVATION DIVISION Division have been compiled with and that the information given above is true and confighte is the best of my knowledge and belief. Signature Rhonda Nelson Production Clerk Title	HOLE SIZE					DEPTH SET						
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top autowate of the depth of the producing Method (Flow, pump, gas lift, etc.) Length of Test Length of Test Tubing Pressure Oil - Bbls. Casing Pressure Choke Size GAS WELL Actual Prod. Test - MCF/D Length of Test Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Fosting Method (pitor, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations 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 Rhonda Nelson Production Clerk Title Title Auto 2 8 1992 Telephone No.									9-11-92			
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top autowate of the depth of the producing Method (Flow, pump, gas lift, etc.) Length of Test Length of Test Tubing Pressure Oil - Bbls. Casing Pressure Choke Size GAS WELL Actual Prod. Test - MCF/D Length of Test Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Fosting Method (pitor, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations 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 Rhonda Nelson Production Clerk Title Title Auto 2 8 1992 Telephone No.									Cha of			
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top analysis by the depth of the formation of the first New Oil Run To Tank Date of Test Length of Test Tubing Pressure Casing Pressure Casing Pressure Choke Size Choke Size GAS WELL Actual Prod. Test - MCF/D Length of Test Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Fosting Method (pitor, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations 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 Rhonda Nelson Production Clerk Title Ti	TO SOME DESCRIPTION OF THE OTHER	TEODAL	LOWAR	i.E		L						
Date First New Oil Run To Tank Date of Test Producing Method (Plow, Party, garty, etc.) Casing Pressure Casing Pressure Choke Size Casing Pressure Casing Pressure Casing Pressure Casing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Oil Conservation Division have been complied with and that the information given above is true and complete is the best of my knowledge and belief. Signature Rhonda Nelson Production Clerk Title Title	OIL WELL (Test must be after re	ecovery of total	volume of l	oad o	il and must	be equal to or	exceed top allo	wable for this	depth or be fo	or full 24 hours	r.)	
Length of Test Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas-MCF Gas-M						Producing M	eihod (Flow, pu	mp, gas iyi, ei	(C.)			
Actual Prod. During Test Oil - Bbls. GAS WELL Actual Prod. Test - MCF/D Length of Test Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Oil CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and confinete in the best of my knowledge and belief. Signature Rhonda Nelson Production Clerk Printed Name AUG 2 8 1992 748-3303 Date Title	Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
GAS WELL Actual Prod. Test - MCF/D Length of Test Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Olic Conservation Division have been complied with and that the information given above is true and confiplete to the best of my knowledge and belief. Signature Rhonda Nelson Production Clerk Printed Name Aug 2 8 1992 Telephone No. Bbis. Condensate/MMCF Casing Pressure (Shut-in) Clock Size OIL CONSERVATION DIVISION Date Approved SEP 1 1992 By ORIGINAL SIGNED DV MIKE WILLIAMS SUPERVISOR, DISTRICT 19 Title Title Title Title	Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas-MCF			
Actual Prod. Test - MCF/D Length of Test Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Clock Size OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete is the best of my knowledge and belief. Signature Rhonda Nelson Production Clerk Title AUG 2 8 1992 Telephone No.	Notice 1100 2 2 2 3 3											
Total Prod. Test - MCPD Total Production (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size OIL CONSERVATION DIVISION OIL CONSERVATION DIVISION OIL CONSERVATION DIVISION OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature Rhonda Nelson Production Clerk Printed Name AUG 2 8 1992 Telephone No.	GAS WELL	17				Bbls, Conden	sale/MMCF		Gravity of Co	ndensate		
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete is the best of my knowledge and belief. Signature Rhonda Nelson Production Clerk Printed Name AUG 2 8 1992 Telephone No. Tubing Pressure (Shut-in) OIL CONSERVATION DIVISION Date Approved SEP 1992 ORIGINAL SIGNED EX MIKE WILLIAMS SUPERVISOR, DISTRICT II	The state of the s								Choke Size			
I hereby certify that the rules and regulations 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 Rhonda Nelson Production Clerk Title Printed Name AUG 2 8 1992 Telephone No. Date Approved SEP 1992 ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II	resting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Give site			
I hereby certify that the rules and regulations 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 Rhonda Nelson Production Clerk Title Printed Name AUG 2 8 1992 Telephone No. Date Approved SEP 1992 ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II	VI. OPERATOR CERTIFICA	ATE OF C	OMPLI	AN	CE	(DIL CON	SERVA	TION D	IVISIO	V	
Signature Rhonda Nelson Production Clerk Ringe Name AUG 2 8 1992 Date Date Approved ORIGINAL SIGNED EV MIKE WILLIAMS SUPERVISOR, DISTRICT II Title	t bearing earlify that the rules and regula	tions of the Oil	Conservation	מכ		4000						
Signature Rhonda Nelson Production Clerk Title Printed Name AUG 2 8 1992 Telephone No. By ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II	is true and complete to the best of my knowledge and belief.					Date	Approved	SEP	199			
Signature Rhonda Nelson Production Clerk Title Printed Name AUG 2 8 1992 Telephone No. By MIKE WILLIAMS SUPERVISOR, DISTRICT IS Title Title		11.110	_)						INIAT SIGE	MED EV		
Rhonda Nelson Production Clerk Rhonda Nelson Title Printed Name AUG 2 8 1992 Date SUPERVISOR, DISTRICT II Title Title		MXX										
AUG 2 8 1992 748-3303 Date Telephone No.	Rhonda Nelson	Product				SUPERVISOR, DISTRICT II						
Date Telephone No.	Printed Name AUG 2 8 1992		748-	330.		11110					•	
	Date		Telephot	ne No								

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- with Rule 111. 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

