District [ PO Box 1980, Hobbs, NM \$8241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

District II

PO Drawer DD, Artesia, NM 88211-0719 District III

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

Previous Operator Signature

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

ORT

1000 Rio Brazo District IV	1000 Rio Brazos Rd., Aztec, NM 8741 District IV				PO Box 2088 Santa Fe, NM 87504-2088					Submit to Appropriate District O  5 Co				
PO Box 2088, S	PO Box 2088, Santa Fe, NM 87504-208				ST FOR ALLOWABLE AND AUTHORIZAT					   XX  +1				
<u>``</u>	<u>F</u>	REQUES	T FOR	ALLOWA	BLE AND	AUTHOR	17.AT	TON TO 1	rn .	AI	MENDED R	EP		
Barba	CSI	TON TO	OGRID Number											
303 W		001621												
Midland, Texas 79701							3 Reason for Filing Code							
30 - 0 1 F s	T	Pool Name												
30 - 0 15-21182 Property Code			Atoka Penn (Morrow)					' Pool Code						
004266			Roger	s "10" Con	' Property	Property Name				70800	Well Number			
II. 10 St	urface I	ocation								1	Yell Number			
Ul or lot no. S	Section	Township	Range	Lot.ldn	Feet from the	North/Sout								
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DC	Oltom H	lole Loca	7						La	ist	Eddy			
I	10	18S	Range 26E	Lot Idn  Connection Date	Feet from the	South		Feet from the	Fast/West line					
12 Lac Code 12	Producing	Method Code			1650			660		st.	County Eddy			
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III. Oil and	ransporte	rs								o experience D	ale			
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14700			88210					100 ZOE						
14/831	147831 Agave Energy 105 South Four					0061720								
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					Harris San			/ ***	r.·	1.0.0		$\dashv$		
												$\dashv$		
IV. Produced	Water								24	<u>ភ</u> ូរ៉ូ ។	1			
POD	Water			····			***			1 7 m				
0961750	L				" POD ULS	M POD ULSTR Location and Descrip			ption Syrica and					
V. Well Com	pletion	Data		101					White the same					
Spud Date 24			eady Date		" TD	" TD "			PBTD					
N Hole	* Hole Size									2º Perforations				
11016	3131.		" Casiz	ng & Tubing Size		32 Depth Set			<sup>13</sup> Sacks Cement					
										orcki Cen	nent	-		
									_			-		
								<del> </del> -				1		
VI. Well Test	Data											-		
St Date New Oil		Gas Delivery D	ate	" Test Date										
		_	- 1	rest Date	" Т	" Test Length		M Thg. Pressure		M Cag. Pressure				
" Choke Size		41 Oil		a Water		Gas	<del> </del>							
* I hereby certify the a	I hereby certify that the rules of the Oil Con ith and that the information given above as to		1		1			" AOF		" Test Method				
with and that the information knowledge and belief.	rules of the ion given abo	Oil Conservatione is true and	on Division	have been complied	ed									
		OIL CONSERVATION DIVISION												
Printed name:	Approved by:	Approved by: ORIGINAL SIGNED BY TIME												
Title:	Tide: DISTRICT II SUPERVISOR					. GUM								
Manager 0	Approval Date:													
"If this is a change of on	11/28/95 Phone: 915/687-1777  If this is a change of operator fill in the OCRID and						DEC 7 1995							

Printed Name

itle

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.

- Operator's name and address 1.
- 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

  AO Add oil/condensate transporter

  CO Change oil/condensate transporter

  Add gas transporter 3. NW RCHO CAG CRT

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 5.
- The pool code for this pool 6.
- 7 The property code for this completion
- The property name (well name) for this completion 8.
- The well number for this completion 9.
- 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 11.
- Lease code from the following table: F Federal S State 12.
  - Fee Jicarilla UNU
  - Navajo Ute Mountain Ute Other Indian Tribe
- 13. The producing method code from the following table: Flowing
  Pumping or other artificial lift
- 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
- 17. MO/DA/YR of the expiration of C-129 approval for this
- 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.
- 11. Product code from the following table:

- T' e ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Bettery 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.
- Total vertical depth of the well 27.
- Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- **30**. Inside diameter of the well bore
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and 32.
- Number of sacks of cement used per casing string 33.

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 34.
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- Length in hours of the test 37.
- 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
- Barrels of oil produced during the test 41.
- 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; Flowing Pumping Swabbing 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 47.