District 1

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

Form C-104

Revised February 21, 1994

Instructions on back

Submit to Appropriate District Office

5 Copies

OIL CONSERVATION DIVISION PO Box 2088

State of New Mexico Energy, Minerals & Natural Resources Department

00 Rio Brazos istrict IV				Santa Fe								NDED REPORT	
) Box 2088, Sa	RI	EQUEST I	FOR AI	LOWABL	E AND	AU'	THORI	ZATI	ON TO TR	ANSP	ORT	-	
Operator name and Address H & S Oil LLC									009572				
	P.O	. Box 186	•	-0186 .					CH 1/1,	Resson for /97		lode र १० जन्म र म्हार है। १६८० सार्व हैन्द्र र बस्तुस्स्मा वर्षाहरू सर्वत स्ट्रालिक प्रवृत्ति	
AM Number 30 - 015-21674 Benson Queen Gray						Pool Name				Pool Code			
	operty Code		¹ Property Name						* Well Number				
4846			McClay Federal						·		10	·	
l. 10 (Surface	Location Township					North/South Line Feet from the			East/West line County			
F	33	185	30E		1650		North		2310	West		Eddy	
		Hole Loca	l	<u>. </u>					l				
UL or lot no.		Township	Range	Lot idn	Feet from 1	he	North/So	uth line	Feet from the	East/We	st line	County	
11 Lac Code 13 Produ		ng Method Code	Code M Gas Connection Date		15 C-129 Peru		ait Number		C-129 Effective	Date	" C-1	29 Expiration Date	
Fed	P							<u> </u>			 		
II. Oil and Ga		Transporters "Transporter Name				" POD " 0/0							
ogrid		and A ldress							and Description				
015694		Navajo Re		sesia, NM	10	4511	0	0					
		501 E. Fa	alli AL				1000000						
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V. Prod		ater								IST. 2	<u> </u>		
	POD				24	POD U	LSTR Local	ion and	Description				
V. Well	Comple	tion Data							1 11 11 11 11 11 11 11 11 11 11 11 11 1		1	· DIIC, DC,MC	
³³ Spud Date		M Ready Date			or TD		" PBTD		" Perfor	auons			
31 Hole Size		<u> </u>	31 Casing & Tubing Size			33 Depth Set			Set	Sacks Cement			
											7 -98-97		
										a haan			
										·			
VI. We	ll Test D	Data	L	 					L				
Date New Oil			Gas Delivery Date 71 Te		est Date		3 Test Length		" Tbg.	14 Thg. Pressure		** Csg. Pressure	
41 Choke Size		4	4 OII . 41		Water		44 Gas		46 /	4 AOF		4 Test Method	
with and tha knowledge a	t the informat	rafes of the Oil of th	Conscruation is true and co	Division have be omplete to the best	t of my	Appre	O		ONSERVA'			SION	
Signature: / Lewis / C. Pecca							Approved by: SUPERVISOR, DISTRICT II Title:						
Printed name: Herbert R. Spencer							Approval Date: MAR 1 8 1996						
Date: 3/12/97, Phone: 505-746-6658													
,		operator fill in		number and nar		evious o	perator	Cno	ncer/Co-ow	ner		3/12/9	
	Her	le T	/ Ja	un.			bert R.	spe:	11CET / CO-OM		Title	Date	
	Previou	us Operator Sign	satuje			L'T	INTER MARK						

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 \boldsymbol{z} 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 (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 requested) request for test anomable linclude v 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
- 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
- Lease code from the following table:

Federal

SPJ

State Fee Jicarilla Ň

- 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
- 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
- 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.
- 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.) 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.
- 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 29. 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
- 32. Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and
- 34. Number of eacks 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.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 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
- MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- The method used to test the well: 46 Flowing Pumping Swapbing

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.