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/ Betty

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

District II TO Drawer DD, Artesia, NM 88211-0719 District III

OIL CONSERVATION DIVISION PO Box 2088

Instructions on back Submit to Appropriate District Office 5 Copies

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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 bar

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.
- Reason for filing code from the following table: 3.

RC CH CO CG CG RT

or filing code from the following tat New Well Recompletion Change of Operator Add oil/condensate transporter Change oil/condensate transporter Add gas transporter Change gas transporter

Change gas transporter
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
- 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:
 F Federal
 S State
 P Fee
 J Jicarilla
 N Navajo
 U Ute Mountain Ute
 I Other Indian Tribe 12

- 13. The producing method code from the following table: 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.
- 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.
- 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
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. Inside diameter of the well bore
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 32.
- 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.

- MO/DA/YR that new oil was first produced 34.
- 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
- 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
- MCF of gas produced during the test 43
- 44. Gas well calculated absolute open flow in MCF/D
- 45. The method used to test the well: Flowing Pumping Swabbin

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.

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

District II

Instructions on back
Submit to Appropriate District Office
5 Copies

O Drawer DD,	Artesia, NM	88211-0719	OII	CONSE	RVATION BOX 2		OIVISIO	NC	Subm	it to Ap	propria	ate District Office 5 Copies
000 Rio Brazos District IV	Rd., Aztec, l	NM 87410		Santa Fe	e, NM 8	7504	-2088] AME	NDED REPORT
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7.00		10	Operator name	and Address					010179	¹ OGRI	D Numb	er
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	l Test D		elivery Date	мт	st Date		37 Test L	enoth	N TL-	Pressure		3º Cag. Pressure
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	the information	rules of the Oil on given above					O	IL C	ONSERVA'	TION	DIVI	SION
Signature:		esse	erte			Approv	ved by:	Of	HGINAL SIGNAL SIGNAL	VED BY	TIM	W. GUM
Printed name:	VICK	ie Teel	1				val Date:					
Date:	Prod 9/30	uction A		505/623-0	6601		-	··········	061	15 19	50	
		perator fill in t				ous ope	rator					
	Previous	Operator Sign	nature			Pris	nted Name				Title	Date
		-,	•									

State of New Mexico
Energy, Minerals & Natural Resources Department

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

District II 20 Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

trict III 0 Rio Brazon trict IV	Rd., Antec,	NM 87410		PC Santa Fe	D Box 20 , NM 87:	504-2088				5 Copies
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			Operator name	and Address			ļ	010179	OGRID	Number
	vey E.		Company				F		Reason for F	iling Code
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۰ <i>۰</i> -15 - 30 - 30	PI Number	1	Imdosa 1	Pomo Snr		Name				
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	Surface	Location							1,	·
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UL or lot no		Township		ot Idn	Feet from the	North/Se	outh line	Feet from the	East/West	line County
Of or the inc				1						
¹² Lee Code	" Produci	ing Method (Code 14 Gas Co	nnection Date	" C-129	Permit Number	"	C-129 Effective l	Date	17 C-129 Expiration Date
II. Oil a	and Gas	Transpo	rters							
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V. Pro	duced W	ater			And the second					
	^B POD				²⁴ P	OD ULSTR Loc	ation and	Description		
V. Well	Comple	etion Da	ta					***************************************		
	Spud Date		16 Ready Da	ie	27	TD		¹¹ PBTD		1º Perforations
3/19	79		2/23/96		11,0	061'		6862'		6202-6494 oa
	Hole Si	ze	31 C	asing & Tubing	g Size		32 Depth S	Set		33 Sacks Cement
17_1	/2"		13	3/8, 48#	<u>!</u>	380'			475	
12 1			9	5/8, 32.	3 & 36#	2900'			2050)
8 3	3/4''		5	1/2, 17#	<u> </u>	11,06	1'		1190) 2 stages
})/ 			·······						
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	hoke Size		41 Oil	126	Water	TST	4.5	44 /	AOF	4 Test Method pmp
_			Ŏ	120	BLW	1511.	L			rt
" I hereby	certify that the	rules of the	Oil Conservation D	ivision have be	en complied	,		ONSERVA'	TION F	NUISION
with and the		tion given abo	ove is true and com	piete to the besi	t of my	,	JIL C	ONSERVA	HON L	71 4 151014
Signature:	11	.: 180.	est .			Approved by:	OR	IGINAL SIGI	MED BY	TIM W. GUM
Printed nam	16: 774 W	kie Tee				Title:	DIS	TRICT II SU	Pervis	R
Title:			n Analyst			Approval Date:		n	T 15	1996
Date:				505/623-0	6601				,, <u>, , , , , , , , , , , , , , , , , ,</u>	
		0/96	in the OGRID nu			ous operator				
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	Previo	us Operator	Signature			Printed Nam	e		T	itle Date
1	•									

State of New Mexico
Energy, Minerals & Natural Resources Department

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

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

OIL CONSERVATION DIVISION

District III	m	NR 6 97418			O Box 2						5 Copies
1 000 Rio Brazos District IV	Ka., Amee, I	NM 8/410		Santa Fe	e, NM 8	7504-208	88			AME	ENDED REPORT
PO Box 2088, S	•									•	
I.	RE			····	LE AND	AUTH	DRIZAT	ION TO TE			
		•	Operator name	and Address				010170	¹ OGRII) Numb	er
Har	vey E. S	Yates Co	ompany					010179		·	
P.0	. Box 19	933						'	Reason for	r Filing	Code
Ros	well, N	.M. 882	202 5	05/623-6	5601			RC			
¹ A	PI Number		······		¹ Poe	ol Name				• 1	Pool Code
30 - 015-	22830	İ	Undesg	Bone Spr	ing						
, Pr	operty Code				¹ Prop	erty Name				' W	di Number
012	990	ŀ	Travis	State					7	<i> </i> £1	
II. 10 S	Surface I	ocation								<u> </u>	
Ul or lot no.	Section	Township	Range I.	ot.ldn	Feet from th	e Nort	h/South Line	Feet from the	East/We	et line	County
К	13	18S	28E	ļ	1780	9	outh	2080	Wes	st	Eddy
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UL or lot po.	Section	Township		Lot Idn	Feet from t	he Nor	th/South line	Feet from the	East/We	at line	County
020.20.20.											•
13 Lae Code	13 Producin	g Method Co	rde L'' Gas Co	nnection Date	¹³ C-12	9 Permit Nun	her	16 C-129 Effective	Date	" C-	129 Expiration Date
S	SI	g mand co		Januara Date	"	., 10,110,110,1		0 127 22.00.00		_	
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" Cho	ke Size	10	41 Oil	126	Valer TOT V.T	mo	Gas TM	4 /	OF		4 Test Method
-		18		126	рГМ	15	TIAI				pmp
" I hereby ce	rtify that the r	ules of the Oil	Conservation Di	ivision have bee	n complied						
with and that knowledge an		n given above	is true and comp	olete to the best	of my			ONSERVA			
Signature:		X	٨ ٨			Approved by		IGINAL SIGI			W. GUM
		ellia	<i>uu</i>					STRICT II SU			
Printed name:	Vick	ie Teel				Title:	:		- <u></u>		
Title:	Produ	uction A	Analyst			Approval Da	c :	nct	15 1	200	
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" If this is			the OGRID nur			ous operator					
	Previous	Operator Sig	nature			Printed N	ame		7	Title	Date

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

District II NO Drawer DD, Artesia, NM 88211-0719

District III

OIL CONSERVATION DIVISION PO Box 2088

Instructions on back Submit to Appropriate District Office 5 Copies

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