District I

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

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OIL CONSERVATION DIVISION

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104U
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
Submit to Appropriate District Office 5 Copies

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strict IV				Santa I	c, Mivi o	1304	2000				AME	NDED REPORT	
) Box 2 088, Sa	nta Fe, NM 1 RE	7504-2088 OUEST	FOR AL	LOWAB	LE AND	AUT	rhori:	ZATI	ON TO TR	ANSP	ORT	e e e e e e e e e e e e e e e e e e e	
Operator name and Address							1) Numb	er	
H & S Oil LLC P.O. Box 186							0095				Reason for Filing Code to the Park E		
Artesia, NM 88211-0186											1/1/97		
											* Pool Code		
(322)(400)							ol Name .				3250		
30 - 0 15-25514			* Property Name							9 Well Number			
' Property Code 4853			Scripps							8			
I. 10 S	Surface I	ocation	:		•								
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11 Lac Code	13 Danduele	ig Method Co	de H Ges C	onnection Da	te 15 C-12	9 Perm	t Number	 	C-129 Effective	Date	17 C-	129 Expiration Date	
State	P	ig telering Co	323	0220002 2 4									
III. Oil a	nd Gas '	Franspor	ters ·		1								
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, Spi	ud Date		Kendy Date										
³¹ Hole Size			³³ Casing & Tubing Size				33 Depth Scl				M Sacks Cement		
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VI. Wel	l Test D	ata							26 00-4	D	 -	41 Cag. Pressure	
M Date New Oil		× Gas 1	Gas Delivery Date		n Test Date		" Test Length		" Tbg. Pressure			Cig. Frants	
			44 OII 44		Water .		4 Gas		4 AOF			" Test Method	
41 Choke Size			Oil		TARCE		743						
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with and that	the informati	on given above	is true and con	plete to the be	at of my		0	IL C	ONSERVA'	ION	ואומ	ZION	
knowledge and belief. Signature:							Approved by: SUPERVISOR, DISTRICT II						
Printed name: Herbert R. Spencer							Title:						
merbert iv. spender						Approval Date: FEB - 5 1997							
Date: Jan. 23, 1997 Phone: 505-746-6658						1 20 3 1001							
4 If this is	an. 23,	1997	the OFFILD of			vious op	erator						
		Veele	KK	/ \/.	e-6.6.e-	Н	erbert	R. S	pencer	Co-0		1/23/97	
H	Previou	Operator St	nelure			Pri	nted Name				Title	Date	

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.

- 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) 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.
- The bottom hole location of this completion
- Lease code from the following table:
 F Federal
 S State
 P Fee
 J Jicarilla 12.

N

- Navajo Ute Mountain Ute 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
- 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 QGRID 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 in this well bore. 29.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 30.

- Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- 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.

- 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
- 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
- Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44 MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- 46. The method used to test the well:

F Flowing
P Pumping
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 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.