

District I
PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719 **

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 21, 1994

Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address LOUIS DREYFUS NATURAL GAS CORP. 14000 Quail Springs Parkway, Ste. 600 Oklahoma City, OK 73134		² OGRID Number 025773
		³ Reason for Filing Code NW
⁴ API Number 30 - 0 15-27803	⁵ Pool Name <i>North</i> Illinois Camp; (Morrow)	⁶ Pool Code 78890
⁷ Property Code 16540	⁸ Property Name Artesia 21 State	⁹ Well Number 1

II. ¹⁰ Surface Location

UL or lot no. C	Section 21	Township 18S	Range 28E	Lot Idn	Feet from the 760	North/South Line North	Feet from the 2130	East/West line West	County Eddy
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¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Lse Code S	¹³ Producing Method Code Flowing	¹⁴ Gas Connection Date 3/25/95	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
009171	GPM Bartlesville, OK 74004	2814945	G	C Section 21-18S-28E Custody Transfer Meter
034019	Phillips 66 Company 9CI Adams Bldg. Bartlesville, OK 74004	2814944	O	C Section 21-18S-28E Tank Battery

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MAY 11 1995

OIL CON. DIV.

IV. Produced Water

²³ POD 2814946	²⁴ POD ULSTR Location and Description C Section 21-18S-28E Tank Battery
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DIST. 2

V. Well Completion Data

²⁵ Spud Date 11/1/94	²⁶ Ready Date 3/25/95	²⁷ TD 10,720'	²⁸ PBSD 10,678'	²⁹ Perforations 10,360-366' 10,406-436'
³⁰ Hole Size 17-1/2"	³¹ Casing & Tubing Size 13-3/8"	³² Depth Set 431'	³³ Sacks Cement 365 sx	
12-1/4"	9-5/8"	4,770'	1350 sx	
8-3/8"	7"	9,318'	660 sx	
6-1/8"	5"	10,719'	250 sx	

VI. Well Test Data

³⁴ Date New Oil 3/29/95	³⁵ Gas Delivery Date 3/25/95	³⁶ Test Date 4/27/95	³⁷ Test Length 24 hr.	³⁸ Tbg. Pressure 700	³⁹ Csg. Pressure 31
⁴⁰ Choke Size 12/64"	⁴¹ Oil 9	⁴² Water 2	⁴³ Gas 547 mcf	⁴⁴ AOF	⁴⁵ Test Method Flowing

I hereby certify that the rules 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:

Printed name: Kent Sams

Title: Engineer

Date: 5/9/95

Phone: (405) 749-1300

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

Title:

Approval Date:

MAY 15 1995

⁴⁶ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

New Mexico Oil Conservation Division
C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "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
2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
3. 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
AG 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.
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
10. 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.
11. The bottom hole location of this completion
12. Lease code from the following table:
F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I 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
15. The permit number from the District approved C-129 for this completion
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 completion
18. The gas or oil transporter's OGRID number
19. Name and address of the transporter of the product
20. 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.
21. Product code from the following table:
O Oil
G Gas
22. 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.)
23. 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.
24. 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.)
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
29. Top and bottom perforation in this completion or casing shoe and TD if openhole
30. Inside diameter of the well bore
31. Outside diameter of the casing and tubing
32. 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.

34. MO/DA/YR that new oil was first produced
35. 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
38. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
39. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells
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
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:
F Flowing
P Pumping
S Swabbing
If other method please write it in.
46. 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