												0155.	
	District I PO Box 1980, Hobbs, NN District II	f 88241-1980	State of New Mexico 51-12345 Energy, Minerals & Natural Resources Department							Form C-104 Octobel 18, 1994			
	811 South First, Artesia. District III	NM 88210	(	DIL CON	TION DIVISION			1000 CT 11	ری bmit to	In Appropri	structions on back iate District Office		
	1000 Rio Brazos Rd., Aztec, NM 874102040 SouDistrict IVSanta Fe,					in Pach NM 87	eco 505	262	RECEIVE		110	5 Copies	
	2040 South Pacheco, Santa Fa, NM 87505 I. REQUEST FOR ALLOWABLE A						1	A 2526	ADTE	412 L		ENDED REPORT	
		ND AL	THOR	TAN 5	ION TO	TRAM:		<u></u>					
	Robert H. Forrest, Jr 609 Elora						1050512			61811191 OGRID Number			
			1 88220				CH - 5			Reason for Filing Code			
L	<sup>4</sup> API Numbe 30 - 0 <i>15</i> - 2997	<b>r</b>					CEFICE	* Pool Code					
	' Property Co	de	Power G-SA Property Name Shinnery Federa				une				50385		
	<b>2445</b> II. <sup>10</sup> Surface	0	Shinnery Feder				leral				' Well Number		
	II. <sup>10</sup> Surface	Range	Lot.Idn										
	F 5 185		31 E			10'			Feet from the $2310'$		West line	County Eddy	
	<sup>11</sup> Bottom Hole Lo		the second se						L			2009	
		Township	Range	Lot Idn	Feet fro	on the	North/S	outh line	Feet from th	e East/	West line	County	
	" Lse Code " Produ	cing Method Co	ode <sup>14</sup> Gas	Connection Da	.te 15 (	C-129 Perm	i it Number	· · · ·	" C-129 Effecti	re Date	" C-	129 Expiration Date	
	III. Oil and Gas	Transpor	ters				<u> </u>						
	<sup>18</sup> Transporter OGRID	the second s	and the second se	Transporter Name			D	<sup>31</sup> O/G	<sup>22</sup> POD ULSTR Location			cation	
	34053	Plainsi	Markehing + Transportation Drive, Suite 200 E			1.001111			and Description				
		O Desta k n. dland,	Prive, Suite 200 E , Tx 79705			2821014 0							
						<u>A marina di Statu di Katalah di Katalah</u>							
	5097 Conoco, Inc. Po Box 1267			1821015 G									
2000	Ponca City, Ok 74603												
2020		· Produced Water											
I	V. Produced W												
ſ	<sup>13</sup> POD			* POD ULSTR Location and Description									
Ļ	2921012 7. Well Comple	tion Data							•				
Γ	<sup>31</sup> Spud Date	<sup>11</sup> Spud Date <sup>27</sup> Ready Date <sup>27</sup> TD		" TD	* PBTD			* Perforations * DHC DC MC					
$\mathbf{F}$	<sup>31</sup> Hole Size											* DHC, DC,MC	
F			<sup>33</sup> Casing & Tubing Size			" Depth Se			t		34 Sacks Cement		
										Pa.	ster	ITP- 3	
F			·								<u> </u>	6-99	
Ļ	I. Well Test Da									Ľ,	<u>ug</u>	y -	
ſ	B Date New Oil		livery Date	" Tes	t Date		" Test Les						
	4 Choke Size							. <b>2</b> -8	· " Tbg.	Fremure		" Cag. Pressure	
			'Oil Wate		ater		" Gas		" AOF			* Test Method	
1	<sup>7</sup> I hereby certify that the ru with and that the information	les of the Oil Co	onservation Di	vision have been	complied			<u></u>					
1	with and that the information given above is true and complete to the best of my knowledge and belief.						OIL CONSERVATION DIVISION						
ŀ	Printed name: P + + H Zad + T					Approved by: ORIGINAL SIGNED BY TIM W. GUM BEAN							
h	Tille: Dunge												
<b></b>	Date: 2/23/99	······································	Phone: 50	5 885-6	670				3.11.	99			
ſ	If this is a change of ope	erator fill in the $\sim$	OGRID num	ber and name	of the pre-	ious operat	or _						
┞	OISXCX /	Perader Signati	O. TAC	P.O. k	3. <i>4</i> E	31 AR	Hes A	882	10 L 572			2/23/99	
4	p: Ardler	The		7	DorA	4 6.	BEC	KER	512	TI Prie	(le ·	Baie	
	_									rice	<u></u>		

,	1	•		New Mexico Un C C-104 k	onservation U Istructions	Ivision				
•	AMEND	IS AN A	MENDED REPORT, CHECK	BOX LABLED	31.	Inside diame ' the well bore				
			mes at 15.025 PSIA at 60°.		32.	Outside diameter of the casing and tubing				
I	Report all	l öil volum	es to the nearest whole barrel. able for a newly drilled or deep	mad wall must be	33.	Depth of casing and tubing. If a casing liner show top and bottom.				
1	accompai accordan	nied by a ce with Ri	tabulation of the deviation te ule 111.	sts conducted in	34. If the fa	Number of sacks of coment used per casing string				
ļ	All sectio new and	ns of this recomplet	form must be filled out for alloy ed wells.	vable requests on	If 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					
	Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or			certifications for	35. 36.	-				
1	other such changes, 🐒				30. 37.	MO/DA/YR that gas was first produced into a pipeline MO/DA/YR that the following test was completed				
	A separa completio	ete C-104 on.	I must be filed for each po	ol in a multiple	38.	Length in hours of the test				
1	Improperi operators	y filled c unapprov	out or incomplete forms may red.	be returned to	39.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells				
	1.	Operator'	s name and address		40.	Flowing casing pressure - oil wells				
	2.	Operator' assigned	s OGRID number. If you do not and filled in by the District offic	have one it will be a.	41.	Shut-in casing pressure - gas wells Diameter of the choice used in the test				
		Reason fo	or filing code from the following		42.	Diameter of the choke used in the test				
		RC	New Well Recompletion		43.	Barrels of water produced during the test				
		AU	Change of Operator (Include th Add oil/condensate transporter		44.	MCF of gas produced during the test				
		CO AG	Change oil/condensate transpo Add gas transporter	rter	45.	Gas well calculated absolute open flow in MCF/D				
		CG RT	Change gas transporter Request for test allowable	(Include volume	46.	The method used to test the wall:				
			requested) other reason write that reason	in this box.		F Flowing P Pumping S Swabbing				
	4. c		number of this well			If other method please write it in.				
	5. 6.		of the pool for this completion code for this pool	•	47.	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				
	7. The property code for this completion					about this report				
	8. The property name (well name) for this completion			completion	48.	The previous operator's name, the signature, printed name and title of the previous operator's representative				
	9. The well number for this completion					operates this completion, and the date this report was				
	10.	for this lo	ace location of this completio ates government survey design action use that number in the ' e use the OCD unit letter.	atas a i at Number		signed by that person				
	11.	The botto	om hole location of this complet	tion .						
	12.	Lease co F S P	de from the following table: Federal State							
		J N U	Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe	:						
	13.	The prod F P	lucing method code from the fo Flowing Pumping or other artificial lift	llowing table:						
	14.	MO/DA/ gas trans	YR that this completion was fir	st connected to a						
	15.	The perm this com	nit number from the District ap pletion	proved C-129 for						
	16.	MO/DA/	R of the C-129 approval for th	is completion						
	17.		R of the expiration of C-129							
	18.		or oil transporter's OGRID num							
	19.		d address of the transporter of							
	20.		ber assigned to the POD from an ansported by this transporter. If pletion and this POD has no n Il assign a number and write it i	this is a new well		x.				
	21.		code from the following table: Oil Gas							
	22.		TR location of this POD if it is pletion location and a short deac : "Battery A", "Jones CPD",etc							
	23.	this POD	number of the storage from whi property. If this is a new well of has no number the district of and write it here.		·					
	24.		TR location of this POD if it is pletion location and a short desc : "Battery A Water Tank", ", c.)			1				
	25.	MO/DA/	YR drilling commenced							
	26.	MO/DA/	YR this completion was ready to	produce						
	27.	-	tical depth of the well							

Total vertical depth of the well 27.

28.

Plugback vertical depth

29. Top and bottom perforation in this completion or casing shoe and TD if openhole

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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. 30.