State of New Mexico
Energy, Minerals & Natural Resources Department

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Form C-104 Revised February 10, 1994 Instructions on back

Title

President

Date 9-8-94

PO Drawer DD, Artesia, NM \$8211-0719 District III				OIL CONSERVATION DIVISION					SEP 1 Su'Sut to Appropriate District Office					
1000 Rio Brazos Rd., Aztec, NM \$7410				PO Box 2088 Santa Fe, NM 87504-2088					O. C. D.					
District IV PO Box 2068, S									ARTESIA, OFF	KE L		ENDED REPORT		
I.	R	EQUES				AND AL	THOR	IZAT	ION TO T					
Operator name and Address									1 OGRID Number 020451					
SDX Resources, Inc. P. O. Box 5061											¹ Resson for Filing Code			
Midland, TX 79704-5061										CH				
'API Number 30 - 0 15-23919					Pool Nam	e	* Pool Code							
L	operty Code	Mill	Millman- Oueen- Grayburg- San Andre						s, East 46555					
				onoco 7 State							4			
II. 10	Surface	Location	1											
Ut or lot zo.	Section	Township	Range	Lot.1dn	-	l from the	North/Sor		Feet from the	East/West line		County		
D 11	07	l 198 Hole Lo	29E			660	North		540 West		t	Eddy		
UL or lot no.		Township		Lot Ida		t from the	North/South line		Feet from the	East/W	Vest line	County		
												53323,		
12 Lee Code	13 Produci	ng Method C	ode 14 Gas	Connection De	de	14 C-129 Perm	it Number	1	C-129 Effective I	Date	17 C-	17 C-129 Expiration Date		
S	-d C	<u>р</u>		/92				<u>.l</u>	·					
III. Oil and Gas Transpo			ITETS Transporter Name			» PO	D I	¹¹ POD ULSTR Location			ration			
OGRID		and Address						^н О/G			d Description			
012835		Koch Oil Company P.O. Box 1558			252831	.0	0	Tank Battery #6 C 7 19S 29E						
:			idge, TX						C / 198	29E				
009171	4	GPM Gas Corporation 4044 Penbrook					0							
		Odessa, TX 79762												
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<u> </u>									,			······································		
IV. Prodi	iced Wa	iter									·-··			
п	POD					" POD UL	STR Locati	on and D	escription					
25283														
V. Well Completion Data By Spud Date Ready Date						"								
Spud Date			¹⁴ Ready Date			" 110	יי דם		" PBTO		19 Perforations			
³⁴ Hole Size			31 Casing & Tubing Size			¹¹ Depth S				³³ Sacks Cement				
										ρ	+	TO_2		
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		-									-1	-//		
											The second	72		
	Test Da													
M Date New Oil M Gas Delivery D			Delivery Date	ate Nate Date			" Test Length		* Tbg. Pressure			" Csg. Pressure		
** Choke Size ** Oi			" Oil	il ^a Water			a Gas	" AOF			" Test Method			
									201			i est metaod		
* I hereby cert	ify that the n	iles of the Oil	Conservation I	Division have be aplete to the bes	en con	plied	0.1		· · · · · · ·					
knowledge and	belief.	- g// ca =00/c	is due and cod	ipicie to the bes	tor my		OI	r co	NSERVAT	ION I	DIVIS	ION		
Printed name: Ana Natividad							Approved by SUNDOVISOR, ONSTRICT II							
Printed name: Ana Natividad							Title:							
Title:	Agent					Approvi	Approval Date: 027 5 1994							
Date:	94	Phone g	15-685-1	761		200 C S 1958					· ·			
		erstor fill in	the OGRID at	mber and nam	e of ub	e previous oper								
02	23032	Operator Sig	Thres	shold De	velc	pment Co		ion						
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Bud Vinsen

New Mexico Oil Conservation Division C-104 Instructions

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

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.

- The API number of this well
- The name of the pool for this completion 5.
- 6. The pool code for this pool
- The property code for this completion 7.
- 8 The property name (well name) for this completion
- 9 The well number for this completion
- The surface location of this completion United States government survey designat NOTE: If the 10 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.
- The bottom hole location of this completion 11.
- Lease code from the following table
 F Federal
 S State
 P Fee
 J Jicarilla
 N Navajo
 U Ute Mountain Ute 12.

Other Indian Tribe

The producing method code from the following table: F. Flowing Pumping or other artificial lift 13

- 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 17.
- 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: 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.)

- 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 POO if it is different from the well completion location and a short description of the POO (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 26.
- 27. Total vertical depth of the well
- Plugback vertical depth 28
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. inside diameter of the well hore
- 31 Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. $% \label{eq:casing_energy} % \begin{subarray}{ll} \end{subarray} % \begin{sub$ 32.
- 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.

- MO/DA/YR that new oil was first produced 34
- 35 MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 36.
- 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. Berrele 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
- The method used to test the well:
 F Flowing
 P Pumping
 S Swabbing 45.

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.