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

State of New Mexico
Energy, Minerals & Natural Resources Departm

Revised February 10, 1994

SEP 16:94 Instructions on back bubmit to Appropriate District Office

Form C-104

PO Drawer DD, Artenia, NM 88211-0719 District III

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

O. C. D.

1000 Rio Brasos Rd., Aztec, NM 87410 ARTESIA, OFFICE ____ AMENDED REPORT District IV PO Box 2088, Santa Fe, NM 87504-200 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address 1 OGRID Number 020451 SDX Resources, Inc. P. O. Box 5061 ¹ Reason for Flling Code Midland, TX 79704-5061 API Number Pool Name 30 - 015 - 25161 Millman- Oueen- Grayburg- San Andres, East Property Code 1 Property Name Well Number 011291 Conoco 7 State 10 Surface Location II. Ul or lot no. Section Range Lot.ldn North/South Line Feet from the Feet from the East/West line County 07 19S 29E 1980 South 1980 Eddy East 11 Bottom Hole Location UL or lot mo. Section Lot Ida Feet from the North/South fine Feet from the East/West line County 13 Producing Method Code 12 Lee Code 14 Gas Connection Date 15 C-129 Permit Number 1 C-129 Effective Date 17 C-129 Expiration Date 8/92 Oil and Gas Transporters 1º Transporter Name ¹⁴ POD " O/G n POD ULSTR Location OCRID and Description Koch Oil Company 012835 2528010 Tank Battery No. 3 P. O. Box K 07 19S 29E Breckenridge, TX 76024 GPM Gas Corporation 009171 2528030 Tank Battery No. 4001 Penbrook Odessa, TX 79760 IV. Produced Water POD 14 POD ULSTR Location and Description Well Completion Data Spud Date 14 Ready Date " TD " PBTD " Perforations " Hole Size 11 Casing & Tubing Size 12 Depth Set ⁿ Sacks Cement Well Test Data Date New Oil M Gas Delivery Date " Test Date " Test Length H Tog. Pressure " Csg. Pressure " Choke Size " Oil 4 Water a Gas " AOF " Test Method 4 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 OIL CONSERVATION DIVISION knowledge and belief. Signature: Approved by ava Naturdad STREET TOTAL DESTRICT H Printed name: Title: Ana Natividad 5 1094 Title: Approval Date Agent Phone 915-685-1761 Date of If this is a change of operator fill in the OGRID number and name of the previous operator Threshold Development Corporation Previous Operator Signature Title

Bud Vinsen

Pres**i**dent

New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT. CHECK THE BOX LABLED TAMENDED 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.

- 4 The API number of this well
- 5 The name of the pool for this completion
- 6. The pool code for this pool
- 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 11.
- 12 Lease code from the following table:

- Federal State Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe
- 13 The producing method code from the following table: Flowing
 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
- 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
 - Oil Gas

- 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
- MO/DA/YR this completion was ready to produce 26
- 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
- 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.

- 34. MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 35.
- 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. Barrele 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:

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.