

District I
1625 N. French, Hobbs, NM 88240
District II
811 South First, Artesia NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised March 25, 1999
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1 Operator Name and Address Exxon Mobil Corporation P.O. Box 4358 Houston TX 77210-4358		2 OGRID Number 257128
3 Reason for Filing Code RC 73440		
4 API Number 30-015-24500	5 Pool Name Undesign Burton Flat-Strawn Gas	6 Pool Code 72000
7 Property Code 004211	8 Property Name Yates C. Federal	9 Well Number 20

II. 10 Surface Location

UL or lot no. D	Section 5	Township 21S	Range 27E	Lot Idn	Feet from the 1968	North/South line NORTH	Feet from the 660	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	13 Producing Method Code	14 Gas Connection Date	15 C-129 Permit Number	16 C-129 Effective Date	17 C-129 Expiration Date				

III. Oil and Gas Transporters

18 Transporter OGRID 009171	19 Transporter Name and Address GPM GAS CORPORATION P. O. BOX 500020 MIDLAND, TX 79710	20 POD 0953030	21 O/G G	22 POD ULSTR Location and Description D-05-21S-27E YATES C FEDERAL #20

IV. Produced Water

23 POD	24 POD ULSTR Location and Description
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V. Well Completion Data

25 Spud Date 08/24/1984	26 Ready Date 06/29/2000	27 TD 10,500'	28 PBTD 10,470'	29 Perforations 10,108' - 10,248'	30 DHC, MC
31 Hole Size 17 1/2"	32 Casing & Tubing Size 13 3/8"	33 Depth Set 605'	34 Sacks Cement 1100		
12 1/4"	9 5/8"	2631'	930		
8 3/4"	5 1/2"	11566'	3650		

VI. Well Test Data

35 Date New Oil	36 Gas Delivery Date	37 Test Date 07/23/2000	38 Test Length 24.0	39 Tbg. Pressure 0	40 Csg. Pressure 0
41 Choke Size	42 Oil	43 Water 0	44 Gas 72	45 AOF	46 Test Method F

47 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: *Laura R. Fosha*

Printed Name: Laura R. Fosha

Title: Completions Asst. Contract

Date: 08/30/2000

Phone: (713) 431-1826

OIL CONSERVATION DIVISION

Approved by:

Jim W. Green

Title:

District Supervisor

Approved by Date:

SEP 12 2000

48 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
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* 0122 Applied required to produce

DAS

I- THIS IS AN AMENDED REPORT. CHECK THE BOX LABELED AMENDED REPORT AT THE TOP OF THIS DOCUMENT

Report all gas volume 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 form 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. Reasons 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 State 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 the 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 the 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. Write in 'DHC' if this completion is downhole commingled with another completion or 'MC' if there is more than one non-commingled completion in this well bore. Attach actual completed well bore diagram.
31. Inside diameter of the well bore
32. Outside diameter of the casing and tubing
33. Depth of casing and tubing. If a casing liner, show top and bottom.
34. 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. MOIDAIYR that the following test was completed
38. Length in hours of the test
39. Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
40. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
41. Diameter of the choke used in the test
42. 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.
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 about this report
48. 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