District I

State of New Mexico

PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazza Rd., Aztec, NM 87410				Energy, Minerals & Natural Resources Department						Revi		ebruary 10, 199	
			·	OIL CONSERVATION DIVISION PO Box 2088					Submit to Appropriate District Offic 5 Copie				
District IV PO Box 2088, 8				Santa Fe, NM 87504-2088							AMENDED REPORT		
I.						ND AU	THOR	ZAT	ION TO TE		<u> </u>		
	RALO,		Operator at	Operator name and Address						1 OGRID Number 014007			
	O. BO	x 832 TX 7970)2							³ Reason for Filing Code			
		·····	······································	✓ <u>,</u>						AO			
30 - 015-	Number 28257			* Pool Name WILDCAT (MORROW)							9607	ool Code	
¹ Property Code 16299			D. S. "26" FEDERAL						* Well Number				
				D. B.	20	r EDEK/	*LL				1		
Ul or lot no.	10 Surface L or lot no. Section		Range	Lot.ldn	Feet fre	m the	North/South Line		Feet from the	East/West	t line	County	
H	26	208			1783	3	Nort		1259	EAST EDDY			
UL or lot no.		Hole Loc	Cation Range	Lot Ida	10.46	from the North/South line							
020, 8, 20,	50000	10william	Kattle	1201 103	Feet fro) m LL C	North/So	uth line	Feet from the	East/West fine		County	
12 Lee Code F				Connection Dat 06/28/95	a " (C-129 Perm	it Number 1		C-129 Effective I)ate	17 C-12	29 Expiration Date	
III. Oil a			ters Transporter	V		39 may		***					
OGRID			and Addre		21 POD 21 O/G			²² POD ULSTR Location and Description					
015594 15694	NA 50	VAJO REI 11 EAST 1				2815105 0			H-26-2	OS-26 e			
		TESIA, 1											
007057 EL F		PASO NA	O NATURAL GAS COMPANY BOX 1492			2815075 G			H-26-20S-26E				
			ASO, TX 79978										
									0.40				
Samuel Control								JUL 0 8 1995					
Wan Janaka ana (Kana)								OIL CON. DIV.					
	iced Wa	ater							•	Times n			
28150			н-26-20	s-26E		" POD UL	STR Locatio	a and D	escription				
		tion Data			 		·						
¹¹ Spud Date			³⁴ Ready Date			TD OT "			" PBTD		29 Perforations		
* Hole Size			³¹ Casing & Tubing Size			33 Depth Set				²³ Sacks Cement			
												ound:	
	:							 -					
VI. Well	Test De	ata											
VI. Well Test Data			Delivery Date * Test		Date		" Test Length		* Tog. Pre	ssu re	" Cag. Pressure		
4 Choke Size		4, Off		4 W	4 Water		4 Gas		" AOF			Test Method	
4 I hereby certif with and that the knowledge and b Signature: Printed name:	information belief.	given above is	true and comp	ivision have been oblete to the best of	complied of my	Approved	hv. 0	RIGIN	I NSERVATI (AL SIGNED I OF A SUUZE)	OY THE	/ISIC	ON 1176	

Title: REGULATORY ANALYST Approval Date: 1 1995 Date: 06/30/95 Phone: 915 684-7441 f 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 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.

- Operator's name and address 1.
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- 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) 3.
 - request for test anowable inicidus virginia requested)
 If for any other reason write that reason in this box.
- 4 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.
- The property name (well name) for this completion 8.
- The well number for this completion 9.
- 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.
- Lease code from the following table: 12. State
 State
 Jicarilla
 Navajo
 Ute Mountain Ute
 Other Indian Tribe SPJNU
- The producing method code from the following table:
 F Flowing
 P Pumping or other artificial lift 13.
- MO/DA/YR that this completion was first connected to a gas transporter 14.
- 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. completion
- 18. The gas or oil transporter's OGRID number
- Name and address of the transporter of the product 19.
- 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.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 26.
- Total vertical depth of the well 27.
- Plugback vertical depth 28.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- inside diameter of the well bore 30.
- Outside diameter of the pasing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and bottom. 32.
- Number of sacks of cement used per casing string 33.

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.
- 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. 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: 45. F Flowing
 P Pumping
 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— γ 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.