	Form C-104	
Revis	sed February 21, 1994	
	Instructions on back	
ubmit to Appr	opriate District Office	

	Instructions on back						
Submit to Ap	propriate	District Office					
		5 Copies					

Vice President

District I PO Box 1980, I District II PO Drawer DD District III 1000 Rio Brazo District IV	o, Artesia, Ni e Rd., Aziec	M 88211-0719 , NM 87410	•	State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088					Form C-10 Revised February 21, 199 Instructions on bac Submit to Appropriate District Offic 5 Copie					
PO Box 2068, S I.	-			ALLOW	ABLE A	ND AU	THORE	ZATI	ON TO T	RANSI	PORT	•		
	AR OIL			ame and Add	ress				(D Numb	52098		
	S. Ave it, Te		79745							3 Reason fo				
									СН 12-31-95					
30-015	API Number -23501		Her	radura		'Pool Name (Dele	-		' Pool Code 30655					
' P	roperty Code	, ,	··-	Herradura Bend (Deleware)				¹ Well Number						
	840	/	_	rley F	ederal		· · · · · · · · · · · · · · · · · · ·	·	5					
II. 10	Surface Section	Location	Range	Let.ldn	Feet from	m the	North/Sout	th Line	Feet from the	East/W	art time	County		
J	31	22S	28E			50	Sout		1650	Eas		Eddy		
11	Bottom 1	Hole Lo	cation		<u> </u>				······································	<u> </u>				
UL or lot no.	Section	Township	Range	Lot Idn	Feet fro	m the	North/Sou	th line	Feet from the	East/W	est line	County		
12 Lae Code	13 Produci	ng Method C	Code ¹⁴ Gas	Connection	Date 15 (C-129 Permi	it Number	10	C-129 Effective	: Date	17 C-	129 Expiration Date		
	<u> </u>	P												
III. Oil a	nd Gas		**	. N		3 PO		11 0/0		*				
OGRID)		Transporter	cas		- PO	* POD				POD ULSTR Location and Description			
1283	> F	.0. Bo	ll Compos 1558	3		0217	10	0	J-31-22S-28E					
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	uced Wa	ater				H POD EII	OTT 1 .1			-				
1 ~	250					- POD OL	SIK LOCAUG	de and D	cocription [
V. Well	Complet	ion Data	a						<u></u>	- 91 :	395 ·	<u> </u>		
¹² Spu	d Date	24	Ready Date		מד יי		» РВТТ	D	2ª Perfe	rations		M DHC, DC,MC		
	³⁴ Hole Size		12	Casing & Tu	bing Size		n D	Pepth Se			M Saci	s Cement		
	······································		_							Pos	ted	1 ID-3		
									2-9-96					
			_			_			-	- Cod	ng	01		
VI. Well	Test Da	nta	<u> </u>	··· · · · ·										
	New Oil		Delivery Date	37	Test Date		* Test Leng	gth	" Tbg.	Pressure		4 Cag. Pressure		
4 Chel	ke Size	-	a Oil		4 Water		4 Gas		* /	OF		" Test Method		
"I bereby 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: Llayel / Lell.					Approved by: SUPERVISOR, DISTRICT II									
Printed name: Lloyd Hill				Title:										
Title: Owner					Approva	Approval Date: FEB = 5 1996								
Date:	7 70		Phone: O	75 586	(_6121	1								

Petro, Inc.

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 we

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 (Include the effective date.)

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
- 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.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:

SP

13.

Federal State Fee Jicarilla

- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table:

 F Flowing
 P Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a gas transporter 14.
- 15.
- The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 16
- 17. MO/DA/YR of the expiration of C-129 approval for this completion
- 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:
 O Oil
 G Gas 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 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
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- 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 29.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 30.

- 31. Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 33.
- 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.

- MO/DA/YR that new oil was first produced 35.
- MO/DA/YR that gas was first produced into a pipeline 36
- 37. MO/DA/YR 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
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40
- 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.
- 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 47.
- 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 48.