District I PO Box 1980, Hobbs. NM \$8241-1980 District II 811 South First, Artesia, NM \$8210 District III 1000 Rio Brazos Rd., Aztec. NM \$7410 District IV		88210	State of New Energy, Minerals & Natural OIL CONSERVATI 2040 South Santa Fe, NI				Resources Department ION DIVISION Pacheco		LIST LIT Submi	It to Appropr	Form C-104 October 18, 1994 Instructions on back iate District Office 5 Copies ENDED REPORT,	
2040 South Pack	ieco, Santa I R]	EQUEST	FOR AL	LOWABI	LE AN	D AU	THOR	IZATI	on to tr	ANSPOR'	Γ	
Operator name and Address									¹ OGRID Number 014007			
P. 0. BOX 832 MIDLAND, TX 79702									' Reason for Filing Code RC			
	PI Number		° Po Malaga; delaware				•			429	* Pool Code	
30 - 015-27996 ' Property Code			Property Name						' Well Number			
15173				COCHITI "	5" FEDE	RAL				1		
II. ¹⁰ S	Section	Location Township	Range Lot.idn Feet		Feet from	m the North/South Line		uth Line	Feet from the	a the East/West line County		
N	5	2 4 S	29E		660		SOUTH		1980	WEST	EDDY	
UL or lot no.	¹¹ Bottom]		ation Range	Lot Idn	Feet from the		North/South line		Feet from the	a the East/West line County		
¹¹ Lse Code	ode ¹³ Producing Method (P		Code ¹⁴ Gas Connection Date		¹⁵ C-129 Permi		it Number	7	" C-129 Effective Date " C-129		C-129 Expiration Date	
		Transport				* 100	D	²¹ O/G				
" Transporter OGRID		¹⁹ Transporter Name and Address				* POD ³¹ O/G			²² POD ULSTR Location and Description			
501		AVAJO REFINING COMPANY 01 E. MAIN STREET				28151	يەر يەر بەر يەر يې چەر 1 ئېر 1 ئەتلەر	0	N-4-24S-29E			
007057 EL P/		RTESIA. NM 88210 L PASO NATURAL GAS COMPANY . O. BOX 1492 L PASO. TX 79978					2814767 G		N-5-24S-29E			
										4		
IV. Produ	ater							RECEIVED OCD ABTESTA				
	POD	1	4S-29E			" POD UL	STR Loca	tion and l	Description	Se Lizerze	1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4	
		ion Data										
²¹ Spud Date		• F 08/1	12	" TD 12,268'		* РВТД 9145 '		* Perform 6514 – 6		» DHC, DC,MC		
	³¹ Hole Size		²² Casing & Tubing Size				ų,	Depth S		_	acks Coment	
17-1/2'			13-3/8"				65	-		SURF - 900 SXS CL. "C"		
12-1/4"			9-5/8"			2700 ' 10660 '			SURF - 1250 SXS HALCO LT/PR 1060 SXS 50/50 + 1000 SXS L1			
					10000				+ 100 SXS PREN.			
VI. Well ¹⁸ Date N	Test Da		livery Data	37 110	Dete		30					
	13/99	²⁴ Gas Delivery Date 08/13/99		³⁷ Test Date 08/20/99		* Test Length 24 HRS.		-	· " Tbg. Pressure -		• Cog. Pressure	
, ." Chok	e'Size	4 Ol 43		4 Water 199			4 Gas 72		4 AOF -		" Test Method PUMPING	
⁴⁷ I hereby certi with and that th knowledge and Signature: Printed name:	e information belief	les of the Oil C a given above is mathematics EA LOGAN	Conservation Di true and comp	lete to the best o	complied of my	Approve Title:	O) at by:	IL CO Origin Distr	NSERVAT NAL SIGNED ICT H SUPER	ION DIVI By Tim W. Wisor		
Title: REGULATORY ANALYST Date: 08/25/99 Phone: (915) 684-7441							Approval Date: 9-8-99					
• If this is a c		erator fill in th Operator Signa		iber and name	of the pre		stor ed Name			Title :	Date	

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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 bas

A request for allowable for a newly drilled or despend 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.

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**

3.

12.

- 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 (Include the effective date.)

 AO
 Add oil/condensate transporter

 CO
 Change oil/condensate transporter

 AG
 Add gas transporter

 CG
 Change gas transporter

 RG
 Change gas transporter

 RT
 Request for test allowable (Include volume requested)

 If for any other reason write that reason in this box.
- The API number of this well Δ.
- 6 The name of the pool for this completion
- The pool code for this pool 6.
- 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 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
 - Lease code from the following table: F Federal S State P Fee J Jicartile
 - S P J

 - NU
 - Navajo Ute Mountain Ute Other Indian Tribe
- 13.
 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.
- 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
- 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.
- 21. Product code from the following table: Oil Gas Ö
- 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
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 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 in this well bore. 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

If 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
- 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. Howing 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 telt the well:
 - Flowing Pumping Swabbin

If other method please write it in.

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- 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.