								(	1ST				
Diuria I State of New Mexico PO Box 1960, Ilobba, NM 51241-1960 Exercy, Minerals & Natural Resources Dep Diuria II						iCO B Departmo	<b>::</b> :::	Form C-104 Revield February 10, 1994					
DE DE WER DD, ARGLE, NM H211-0719 OIL CONSERVATION DIVISION Submit to Approgriate ?							riate District Office 5 Copies						
								MENDED REPORT					
10, BOX 2011, SANA F. NM 17504-2011 I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT									<u>۲۲</u>				
Operator same and Address Manzano Oil Corporation								' OGRID Number 013954					
P.O. Box	ration Ø						' Remon for Filling Code						
Roswell,	Roswell, NM 88202-210				.07					NW			
· API Numbe 30 - 0 15-30742	Esperanza (Delaware)							1 Pool Code					
20 - 0 15-30742		Property Name							' Well Number				
2317:	Esperanza						2						
	Location	Range	Lol.Ida	Feet from 1	<u></u>	North/So	uth Line	Feet from the	E E West Lie	ne County			
J 4	225	27E	•	1650	)	Sou	uth	1650	East	Eddy			
	Hole Loc			11		*	•		1				
UL or lot Do. Socilon,	Township 22S	27E	Lot Ida .			North/Se · SOI	1	Foot from the 1650	East/West III	Eddy			
J 4	Idag Mahod Co	<u>, ⊢, , , , , , , , , , , , , , , , , , </u>	Connection Date			It Number		C-129 Effective		C-129 Espiration Date			
_	mping	1	28/99										
III. Oil and Gas	the second s	the second s	•				* 0/G						
Transporter OGRID		Tressporter N and Address			" POD " 0/G			4 POD ULSTR Location and Description					
32109 LG&E Natural Gathering 2777 Stemmons Fwy, Ste 1700 Dallas, TX 75207					324	247490							
138648 Amoco Pipeline Incorporate 502 N. West Avenue					324757 G								
Levelland, TX 79336													
									5 <sub>1</sub>				
								Constant Constant					
IV. Produced V	Vater							······					
28347				مز 	PODU	LSTR Loca	uon and I	Description	Post	1-28			
V. Well Compl	Well Completion Data Spud Date Ready Date				 כד "			H PBTD :	" PETD " " Perforado				
9/19/99	1	2/28/99		53	311'			5212'		818-54'			
H llole Si	14	" Casing & Tubing Size			4 Depth S					Sacks Cement			
12-1/4"			<u>400</u> 5311										
7-7/8"		5-1/2"											
VI. Well Test I	the second s								······································				
		Hivery Date * Test Date 2/28/99 12/17/99			10 hrs		-	"Tog. Prossure "Cug. Pross Zero 15		<sup>15</sup> Cig. Promore			
- Choke Slie		12/28/99 12/17/9 " OU " Water					- AOF		" Tai Mabod				
Open		13	85	, ,	TSTM		Μ	Swab					
" I bereby certify that the with and that the informa- knowledge and benef.	tion given above	Conservation D Is true and com	livision have been plete to the best	of my				NSERVAT		• •			
Simulare: Tomme Approved by: ORIGINAL SIGNED BY TIM W. GUN 30									BOM BOX				
Printed aume: Donnie E. Brown Tiue:													
Tilde:         VP Engineering         Approval Date:         /-3-CC           Date:         12/23/99         Proces: (505) 623-1996													
Date: 12/23/99	anorta- Giller				<u> </u>								
II THE M & Change of	operator (ULLA)					,							
Prerlo	us Operator Sign	ature			Priz	nied Name		·	Tide	Date			

	New Mexico Oil ( C-104	Conservation netructions	n Division		
Ber	THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED MENDED REPORT AT THE TOP OF THIS DOCUMENT	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.]		
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.			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.		
All sections of this form must be filled out for allowable requests on new and recompleted wells.			The ULSTR location of the POD H it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", atc.		
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.			Tank", etc.) MO/DA/YR drilling commenced		
A s	eparate C-104 must be filed for each pool in a multiple	20,	MO/DA/YR this completion was ready to produce		
			Total vertical depth of the well		
oper	operly filled out or incomplete forms may be returned to ators unapproved.	28.	Plugback vertical depth		
1.	Operator's name and address	29.	Top and bottom perforation in this completion or casing shoe and TD II openhole		
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.	Inside diameter of the well bore		
э.	Beason for filling and training the	31.	Outside diameter of the casing and tubing		
RCH CHO CO CO RT	RC Recompletion CH Change of Operator	32.	Depth of casing and tubing. If a casing liner show top and bottom.		
	CO Change oll/condensate transporter	33,	Number of sacks of coment used per casing string		
	CG Change gas transporter RT Request for test allowable (Include volume	The fo condu	pliowing test data is for an oil well it must be from a test cted only after the total volume of load oil is recovered.		
_	If for any other reason write that reason in this box,	34,	MO/DA/YR that new oil was first produced		
4.	The API number of this well	35.	MO/DA/YR that gas was first produced into a pipeline		
5.	The name of the pool for this completion	36.	MO/DA/YR that the following test was completed		
6.	The pool code for this pool	37.	Length in hours of the test		
7.	The property code for this completion	38.	Flowing tubing pressure - oil wells		
8.	The property name (well name) for this completion		ondom tubing pressure - gas wells		
9.	The well number for this completion	39.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells		
10.	The surface location of this completion NOTE: If the United States government survey designees on the survey designees of the	40.	Diameter of the choke used in the test		
	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.	41.			
11.	The bottom hole location of this completion	42.	Barrels of water produced during the test		
12.	Lease code from the following tables	43.	MCF of gas produced during the test		
	S State	44.	Gas well calculated absolute open flow in MCF/D		
	P Fee J Jicarilla N Navajo U Ute Mountain Ute I Other Indian Tribe	45.	The method used to test the well: F Flowing P Pumping S Swabbing If other method please write it in.		
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift	46.	The signature, printed name, and title of the person authorized to make this report, the date this report was		
14.	MO/DA/YR that this completion was first connected to a gas transporter	47.	about this report		
15.	The permit number from the District approved C-129 for this completion		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 data this report was		
16.	MO/DA/YR of the C-129 approval for this completion		signed by that person		
17.	MO/DA/YR' of the expiration of C-129 approval for this completion				
18.	The gas or oll transporter's OGRID number				
19	Neme and add.				

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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. 21.

Product code from the following table: O Oil G Gae

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