n C-104 () 8, 1994 on back et Office  $\gamma$ Copies

District I O Box 1980, Hobbs, NM 88241-1980	State of New Mexico Energy, Minerals & Natural Resources Department	Form C-10- Revised October 18, 199-		
pistrict II 11 South First, Artesia, NM 88210 District III 000 Ri) Brazos Rd., Aztec, NM 8741	OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505	Instructions on bac Submit to Appropriate District Offic 5 Copi		
ostrict IV 040 South Pacheco, Santa Fe, NM 8 REQUE	7505 ST FOR ALLOWABLE AND AUTHORIZAT	☐ AMENDED REPORT TON TO TRANSPORT		
HS Resources, In 5666 S. Sheridan Tulsa, OK 74133	, Ste 250	'OGRID Number  / 55567  'Reason for Filing Code CH/Effective 7-1-96		
*API Number 30 - 0 15-25188	Pool Name BRUSHY DRAW, DELAWARE	* Pool Code 08080		

040 Sc	outh Paci	heco, Sar	nta Fe, NM 8750 REQUES		LLOWABL	E AND A	UTHOR	IZATI	ON TO TR	ANSPORT	•		
		· . <del></del>			me and Address					<sup>2</sup> OGRID Numb			
			ces, Inc.						1.	5556	7		
6666 S. Sheridan, Ste 250 Tulsa, OK 74133 '							Reason for Filing Code						
	IUIS	a, UN	. /4133	ſ					CH/Effec:	tive 7-1-5	<del>)</del> 6		
		API Number 'Pool Name								* Pool Code			
30 -	0 15	-2518	38	BRUSHY DRAW, DELAWARE						08080			
	Pr	operty C	Code							* Well Number			
	G110	<del>,</del>	9309		FEDERAL					3			
Ι.			e Location										
Ul or	iat no.	Section	Township	Range	Lot.ldn	Feet from the	eet from the North/South Line		Feet from the	East/West line	County		
	G	22	26S	29E		2265	Nort	h	1550	East	Eddy		
			n Hole Lo		· · · · · · · · · · · · · · · · · · ·								
UL o	i lot no.	Section	Township	Range	Lot Idn	Feet from the	North/S	outh line	Feet from the	East/West line	County		
12 1 5	Code	13 Proc	ducing Method C	ode "Ges	Connection Date	15 C 120 D	rmit Number		C-129 Effective	D			
2.3	Cour		outing Michigan	32	Comection Date	C-129 Fe	rmk Number		C-129 Effective )	Date C.	-129 Expiration Date		
II.	Oil a	nd Ga	as Transpo	ners									
"Transporter "Transporter Name OGRID and Address						* POD 21 O/G		;	22 POD ULSTR Location				
	•					1	7710			and Descripti	on		
15694 Navajo Pofining Company			252971	2529 <b>7</b> 10 0									
	PO Drawer 159 Artesia, NM 88211-0159			252	2529780								
05	()97		Conoco,	· · · · · · · · · · · · · · · · · · ·		2529723		G			···		
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V			Water							7	-16-96		
		POD					ULSTR Loca		•	sh	r rp		
	25297				cted into	#2529250	#5 22-2	26S-29	E				
. '			letion Date										
	<sup>22</sup> Spuc	d Date	4	Ready Date		<sup>77</sup> TD	≯ PE	TTD	29 Perfors	ations	™ DHC, DC,MC		
		31 Hole S	Size	3:	Casing & Tubing	Size	33 Depth Set 34 S		<sup>34</sup> Sat	cks Cement			
								<del></del>		<del> </del>			
											<del> </del>		

<sup>2</sup> Spud Date	24 Ready Date	<sup>27</sup> TD	» PBTD	29 Perío	rations	™ DHC, DC,M
31 Hole Size	3: Casing	& Tubing Size	33 Depth Set			<sup>34</sup> Sacks Cement
				manus de la companya	1341	JS
				14 + 1		

Date New Oil	3 Gas Delivery Date	37 Test Date	3x Test Length	" Tbg. Pressure	* Csg. Pressure
" Choke Size	4.00				
Choke Sizi	4º Oil	43 Water	" Gas	45 AOF	" Test Method

with and that the information given a knowledge and belief.	bove is true and comp	plete to the best of my
Signature:	alaha	nen

Printed name:

Approved by:

ORIGINAL SICKED BY TIM W. GUM

Title:

Karla Johnson Title: Production Tech Approval Date:

6-11-96 Pnone: 918/488-8962

be OGRID number and name of the previous operator Karla Johnson Proration Analyst 6/11/96

Printed Name Title Date

## New Mexico Oil Conservation Division C-104 Instructions

		C-104 Ins	tructions	
IF TH	IIS IS AN	AMENDED REPORT, CHECK THE BOX LABLED PORT" AT THE TOP OF THIS DOCUMENT	31,	Inside diameter of the well bore
Repor	t all gas vo	plumes at 15,025 PSIA at 60°	32.	Outside diameter of the casing and tubing
nepor	t all oil voi	umes to the nearest whole barrel.  owable for a newly drilled or deepened well must be	33.	Depth of casing and tubing. If a casing liner show top and bottom.
accon	npanied by	y a tabulation of the deviation tests conducted in Rule 111.	34.	Number of sacks of cement used per casing string
All se	ctions of th	his form must be filled out for allowable requests on pleted wells.	If the condi	following test data is for an oil well it must be from a test acted only after the total volume of load oil is recovered.
Fill ou	t only sec	tions I, II, III, IV, and the operator certifications for	35.	MO/DA/YR that new oil was first produced
other	es of oper	rator, property name, well number, transporter, or ges.	36.	MO/DA/YR that gas was first produced into a pipeline
A se	parate C-1	104 must be filed for each pool in a multiple	37.	MO/DA/YR that the following test was completed
-		out or incomplete forms may be returned to	36.	Length in hours of the test
opera	ors unapp	roved.	39.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
1. 2.	Operat	or's name and address or's OGRID number. If you do not have one it will be	40.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
_	assigne	ed and filled in by the District office.	41.	Diameter of the choke used in the test
3.	NW	n for filing code from the following table: New Well	42.	Barrels of oil produced during the test
	RC CH	Recompletion Change of Operator (include the effective date.)	43.	Barrels of water produced during the test
	AO CO	Add oil/condensate transporter Change oil/condensate transporter	44.	MCF of gas produced during the test
	AG CG	Change gas transporter	45.	Gas well calculated absolute open flow in MCF/D
	RT If for a	Request for test allowable (include volume	46.	The method used to test the well: F Flowing
4.		ny other reason write that reason in this box.	•	P Pumping S Swaphing
<del>.</del> 5.				If other method please write it in.
5. 6.		me of the pool for this completion ol code for this pool	47.	The signature, printed name, and title of the person authorized to make this report, the date this report was
7.		operty code for this completion	-	signed, and the telephone number to call for questions about this report
8.		operty name (well name) for this completion	48.	The previous operator's name, the signature
9.		Il number for this completion		authorized to verify that the previous operator's representative
- o.		rface location of this completion NOTE: If the	· >	operates this completion, and the date this report was signed by that person
	for this	States government survey designates a Lot Number location use that number in the 'UL or lot no.' box. ise use the OCD unit letter.		
11.	The bot	ttom hole location of this completion		• • •
12.	Lease c	ode from the following table:		
	SP	recera: State Fae		
	j N	Jicarilla Naveio		
	Ü	Ute Mountain Ute Other Indian Tribe		
3.	The pro	ducing method code from the following table:		
	P	Pumping or other artificial lift		
4.	gus trail	•		
15.	The per this con	mit number from the District approved C-129 for oppletion		** -
16.		YR of the C-129 approval for this completion		
17.	MO/DA/ complet	YR of the expiration of C-129 approval for this		
8.	The gas	or oil transporter's OGRID number		
9.	Name ar	nd address of the transporter of the product		• • •
20.	or recon	nber assigned to the POD from which this product ransported by this transporter. If this is a new well in the product ransporter is a new well in the product range in the product range is a number and write it here.		
1.	Product O G	code from the following table:		
2	-	Gas		
	(Example	TR location of this POD if it is different from the opletion location and a short description of the POD et "Battery A", "Jones CPD", etc.)	and to the	
3.	from this	property. If this is a new well or recompletion and has no number the district office will be a second to the district of the second to the district of the second to the		
4.	The ULS	TR location of this POD if it is different from the appletion location and a short description c. the POD		
5.	,			
6.		YR this completion was ready to produce		
7.	Total ver	tical depth of the well		e de la companya de La companya de la co
В.		vartical depth		
9.		hattam performing to all		

29.

30.

Top and bottom perforation in this completion or calling shoe and TD if openhole

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 on 'MC' if there are more than three non-commingled completions in this well bore.