District I PO Box 1980, Hobbs, NM 88241-1980 District II

811 South First, Artesia, NM 88210 District III

State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

/	Form C-104
/	Revised October 18, 1994
1	Instructions on back
Submit	to Appropriate District Office
	5 Copies

1000 Rio Brazo	s Rd Aztec	. NM 87410				h Pache						5 Cop	
District IV				Sant	ia re, i	NM 875	005			Г	Тамі	ENDED REPO	
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Amoco Production Company								(² OGRID Number 000778				
			P.O. Box			3				Reason (Code	
			Denver,	CO 8020	1						or rung	Code	
	Al'I Number		······			Pool Name				RC			
30 - 0 45-			70.7			Pool Name						Poul Code	
	roperty Code		Blanc	o Mesave		roperty Nan				72319			
						roperty Nau	ie			* Well Number			
000518	Surface	Location		ince D		·	-				10	<u> </u>	
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12 Ine Code	13 Produci	ng Method C	ode 14 Gas	Connection Date	e '' C	-129 Permit	Number	,	C-129 Effective	Date	" C-	29 Expiration Date	
III. Oil a	nd Gas '	Transpor	rters					<u> </u>	· · · · · · · · · · · · · · · · · · ·				
"Transpo OGRID	rter		* Transporter			²⁶ POD 21 O/G				22 POD ULSTR Location and Description			
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V. Prodi	uced Wa	ter		—				<u>1</u>		MV1	10		
23	1950				2	POD ULS	TR Locutio	n and D	escription (,	<u> </u>		
/. Well (ion Data	····			···					DIST	<u>. T</u>	
25 Spuc	d Date		Ready Date		17 TD		21 PBTT	,	2º Perforat	liane	T .	LINIC DC NC	
10/1/		1	'8/96 7525'			7480'			ŀ			, ,	
	31 Hole Size			³² Caving & Tubing Size				<u> </u>	0		1C-1211		
				625"	33 Depth Set				M Sacks Cement				
12.25"					1021'			1 4	400 sx				
7.875"			4.500"			7516'			6' 6	675 sx			
			2.	375" tub:	7383'								
												· · · · · · · · · · · · · · · · · · ·	
	Test Da	ta			 · · · · · · · · · · · · · · · · · · 	*** ***********			L	·			
		30 Gas I)	3 Gas Delivery Date 3 Test Date 5/6/96		Date	H Test Length		34 Thg. Pressure			4 Csg. Pressure		
					5/6/96		24 hrs				20		
4 Choke			² Oil	Oil OWater		44 Gas		4 AOF		1	* Test Method		
1.000"		0 0		68		F							
" I hereby certi	fy that the rul	es of the Oil	Conservation D	ivision have been	complied	<u> </u>			1		 _		
with and that the knowledge and I		given above i	is true and com	plete to the best o	of my		OIL	CO	NSERVATI	ON D	IVISI	ON	
Signature;	Ant	all	7000			Approved	by:						
Printed name:	ruy	1 140	regere			Title:	OF	RIGINAL	SIGNED BY F	RNIE B	usch_	·	
Patty Haefele .						DEPUTY OIL & GAS INSPECTOR, DIST. #3							
Tide: Staff Assistant							Approval Date: JUN 1 7 1995						
Date: 5/	16/96		Phone:	(303) 830	1-4988								
" If this is a cl	hange of oper	rator fill in t		nber and name o									
	Previous O	perator Sign	sture			Printed	Name		· · · · · · · · · · · · · · · · · · ·	Titl	le	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.

- 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.
- 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. 3.

- 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:
F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I 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.
- The permit number from the District approved C-129 for this completion 15.
- 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
- 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.) 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
- MO/DA/YR this completion was ready to produce 26.
- 27 Total vertical depth of the well
- Plugback vertical depth 28
- 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. $% \label{eq:casing_problem} % \begin{subarray}{ll} \end{subarray} \be$ 33.
- Number of sacks of cement used per casing string 34

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
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- 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
- The method used to test the well:

 F Flowing
 P Pumping
 S Swabbing
 If other method please write it in. 46.

- 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.