District I

Previous Operator Signature

State of New Mexico

Instructions on back	٠.
Submit to Appropriate District Office	Submi
5 Copies	

PO Box 1980, Hobbs, NM 88241-1980 District H				State of New Mexico Energy, Minerals & Natural Resources Department								Eoru	C-10
811 South First, Artesia, NAI 88210									/		Revis	ed October 1	8, 199
District III			OIT CON	ISER'	VATION	DIVIS	, Sul	onit to		Instructions of	n baa		
1000 Rio Braz District IV	os Rd., Azt	ec. NM 87410		20	74V 30	South Pacheco Fe, NM 87505			Submit to Appropriate Distric				Offic Copie
2040 South Pa	checo, Sant	n Fe. NM 8750	05								гт <b>.</b> ,		*,
I.		REQUES	T FOI	R ALLOWA	BLE	AND A	UTHOR	17 ለ ግ	ION TO F	,	A.	MENDED RE	PORT
		AMO	Operate	or name and Addre	33	110	ONTON	IZAI	101 101	RAN	SPOR	T.	
		P. O.	BOX	PRODUCTION CO BOX 800						OGRID Number			
		DEN	VER, COLORADO 80201						000778 3 Reason for Filing Code				
	II Number					01					. 101 1 101	ig Code	
30 - 0 45-	25072					<sup>5</sup> Pool Nau	ie		L	RC	W	4.70	······································
' Pr	operty Cud	e	Blanco Mesaverde						* Pool Code 72319				İ
302			1 Property Name						' Well Number				
II. 10 S	Surface	Location	Barrett A						1E				
Ul or lot no.	Section	Township	Range	Lot.ldn	Liest fo	om the	r <del>: :</del>						]
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11 Lie Code							140111175001	to line	Feet from the	East/W	est line	County	
1	<sup>13</sup> Producia	ig Method Cor	de <sup>14</sup> G	as Connection Date	13	C-129 Permi	Number	!	C 120 Per				- 1
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007057	ET F	Paso Fie Box 49	ld Ser	vices	17	16930	)						_
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12.25"				esing & Tubing Size	e 		2) Depth				Sucks C	-1244	-
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0.75			7.000"			3680' KB			465 sx Class B				-{
				4.5" Line	r	3473	7738 <b>'</b> i	7 R	5	211		D	-
Well Test	- D-4		2.375" tubin			7681'			134 G.				
Dute New Oil		1.0				J							
		Gas Delivery	Date	" Test Date		" Tes	t Length		" Thg. Premure		·		
" Choke Size		42 Oil		8/22/96		24 1	n <b>r</b> e				" C <sub>3</sub>	g. Pressure	
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ted name: Did Alfele						Approved to -							
Patty Haefele U						Title: SUPERVISOR DISTRICT #3							
Staff Assistant						Approval Date:							
8/27/96 Phone: (303) 830-4988 his is a change of operator fill in the OGRID number and name of the previ						SEP - 4 1996							
er ar custinge of	operator fi	ll in the OGRI	D number	and name of the p	revious c	perator			- 10				

Printed Name

Title

Date

## 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 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.

Operator's name and address ١.

2.

3.

5.

6

8.

9.

- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.

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.

If for any other reason write that reason in this box.

- The API number of this well 4.
  - The name of the pool for this completion
    - The pool code for this pool
- The property code for this completion 7.
  - The property name (well name) for this completion
  - 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.
- The bottom hole location of this completion 11.
- Lease code from the following table: 12.

Federal State Fee Jicarilla N T

Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table: 13.

Flowing Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a 14. gas transporter
- The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this complation 16.
- MO/DA/YR of the expiration of C-129 approval for this 17. completion
- The gas or oil transporter's OGRID number 18.
- 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.
- 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.
- 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.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce .... 26
- Total vertical depth of the well 27.
- 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.

- Inside diameter of the well bore 31.
- Outside diameter of the casing and tubing 32.
- Depth of casing and tubing. If a casing liner show top and 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. 1
- MO/DA/YR that new oil was first produced
  MO/DA/YR that gas was first produced into a pipeline 36
- MO/DA/YR that the following test was completed άŻ.
- 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.
- Diameter of the choke used in the test 41.
- Barrels of oil produced during the test 42.
- Barrels of water produced during the test 43.
- MCF of gas produced during the test 44.
- Gas well calculated absolute open flow in MCF/D 45.
- The method used to test the well: 46.

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.