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

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994

District II

Instructions on back

811 South First, Artesia, NM 88210

Submit to Appropriate District Office 5 Copies

District III

OIL CONSERVATION DIVISION 2040 South Pacheco

1000 Rio Brazo District IV				Sant	a Fe,	NM 8	7505			ſ		ENDED R	EDUB	
2040 South Pac I.			FOR AI	LLOWAB	LE A	ND A	UTHOR	TASE	ION TO T	RANS			LION	
I. REQUEST FOR ALLOWABLE AND AUTHORIZATION Operator name and Address Enervest San Juan Operating, L.L.C. 570 Turner Drive, Unit B									² OGRID Number 143189 / S8 \2 ?					
		00 81301								9 G	Hor Filing	g Code		
30 - 0	PI Number 45-28	3891		'Pool Name Basin Fruitland Coal						* Pool Code 71629				
	operty Code	_	Henten Federa				iame	1 'Well Number						
/_	9633 Surface	Location		Torey										
Ul or lot no.			Range Lot.ldn			Feet from the 1140		outh Line h			West line West			
		Hole Locat					-,\			 		<u> </u>		
UL or lot no.	Section	Township	Range	Lot Idn	Feet fr	om the	North/S	outh line	Feet from the	East/	West line	Соип	ity	
12 Lse Code F	13 Producis	ng Method Code	¹⁴ Gas C	onnection Date	15	С-129 Регі	nit Number	1	C-129 Effective	Date	" C-	129 Expiratio	n Date	
		Transporte:									_ <u></u>			
" Transport OGRID	ter	" Transporter Name and Address				* POD ai O		²i O/G	²² POD ULSTR Location and Description					
														
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. Well C	ompleti Date	on Data	dy Date		" TD		* PB1	70	T 29.4	A:	zala z sava			
									²⁹ Perforations		THC, DC,M		IC	
	Hole Size		32 Can	ing & Tubing	Size		33	Depth Set			[™] Sack	s Cement		
						 				 .		· · · · · · · · · · · · · · · · · · ·		
I. Well T	est Dat	 a					· ·							
3 Date New Oil		36 Gas Delivery Date		³⁷ Test Date		Test Le		gth	" Tbg. Pr	essure	** Csg. Pressure		re	
41 Choke Size		⁴² Oil		43 Water		" Gas			45 AOF		* Test Method			
I hereby certify ith and that the it howledge and be gnature:	niormation g lief	s of the Oil Consi	ervation Divise and complete	non have been of the to the best of	complied my	Approve		CON	ISERVATI	ON I	<u> </u>	ON		
gnature: John B. Walker							Title: SUPERVISOR DISTRICT #3							
tle: \ f -	\sim	esiden			· ···	Approva	Date:	30PE	ENVISOR	וופוט	11(7) #			
If this is a change of operator fill in the OGRID number and name of the pre-							SEP 1 6 1996							
Emer	αd								06RI	D #	せざし	415		
	Q6.D	Carol		R.A. D	<u>TCL</u>	Printe AUDT	d Name	Via	OGRI e Persic	tent	tle	9 5	96	

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.

- 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.
- 3.

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

Add das transporter RCH AOO AGO RT

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.

- 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:

Federal State Fee F S P

- ree Jicarilla Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table:

 F Flowing
 P Pumping or other artificial lift 13.

14. MO/DA/YR that this completion was first connected to a gas transporter

15.

- The permit number from the District approved C-129 for this completion
- 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.
- 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:
 O Oil
 G Gas

- 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

- 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.
- 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
- 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 46.

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.