District I P() Box 1980, 1 District II 811 South First District III 1000 Rio Brazo District IV 2040 South Pac I. HS Res 6666 S Tulsa, 30 - 0 05	T FOF Operate	T FOR ALLOWABLE AN Operator name and Address te 250				DIVIS DIVIS eco 7505	ION	Form C-104 cl Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies AMENDED REPORT ION TO TRANSPORT 'OGRID Number 1 5 5 5 6 7 'Reason for Filing Code CH/Effective 7/01/96 'Pool Code 80145						
Pr 1558	<sup>1</sup> Property Name CHAVEZ A FEDERAL							' Well Number						
15587 19298 CHAVEZ A FEDERAL   II. 10 Surface Location									··· <u>-</u> ·····	3				
Ut or lot no.	Section Township Revise Listing In the							ert line	Carrier					
D	21	75	261			660			660	the East/West line North		County		
	r	n Hole Lo	cation							L	<u> </u>			
UL or lot no.	or lot no. Section Township		Range		Lot Idn Fest fr		om the	North/South line		Fect from the	East/West line		County	
<sup>12</sup> Lse Code	<sup>13</sup> Prod	ucing Method C	ode 14	Gas C	Connection Date		C-129 Perm	nit Niverbar			<u> </u>			
F		F					- 167 I CIM	isunder		C-129 Effective I	Date	'' C-12	9 Expiration Date	
III. Oil a									l					
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IV. Produ	iced W	vater												
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		etion Data	 I		·····				. <u> </u>					
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				_			_						me, ne.me	
	" Hole Si			<sup>32</sup> Ca	ising & Tubing	Size		ji	Depth Set	· · · · · · · · · · · · · · · · · · ·		<sup>34</sup> Sacks (	Cement	
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I. Well	Test T	Data	<u></u>									$\underline{O}$		
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45 Choke			<sup>2</sup> Oil		• Wa			" Ga		" AOI	F	44	Test Method	
<sup>6</sup> I hereby certify with and that the knowledge and b Signature:	mormage	rules of the Oil ( on given above i	Conservations frue and o	on Div comple	ision have been a	complied my	Approve			NSERVATI				
	(arla	Johnson					Title:		DIST		<u>ievis</u> a	::** <b>¥9.</b> }}	YUN	
		n Tech			······································	•	Approval	Date:	.]]]]]	23 1005		Diki /		
Date 6-11-	_				8/488-19		<u> </u>					JUN	<del>5 / 1996-</del>	
* If this is a chi 023067	M	Operator Sign	MAC	numi	ber and name o	f the pre	Karla	tor Johnso d Name	Dn	Prorat	tion A Til		t 6/11/96	

## New Mexico Oil Conservation Division C-104 Instructions

IF THI	S IS AN AMENDED REPORT, CHECK THE BOX LABLED	31.	Inside diameter of the well bore				
	all gas volumes at 15.025 PSIA at 60°.	32.	Outside diameter of the casing and tubing				
Report	all oil volumes to the nearest whole barrel.	33.	Depth of casing and tubing. If a casing liner show top and bottom.				
accom	est for allowable for a newly drilled or deepened well must be banied by a tabulation of the deviation tests conducted in ance with Rule 111.	34.	Number of sacks of cement used per casing string				
All sec	tions of this form must be filled out for allowable requests on id recompleted wells.	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				
change	only sections I, II, III, IV, and the operator certifications for s of operator, property name, well number, transporter, or uch changes.	36.	MO/DA/YR that gas was first produced into a pipeline				
	arate C-104 must be filed for each pool in a multiple	37.	MO/DA/YR that the following test was completed				
comple	tion.	38.	Length in hours of the test				
improp operato	erly filled out or incomplete forms may be returned to ors unapproved.	39.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells				
1.	Operator's name and address	40.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells				
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	41.	Diameter of the choke used in the test				
3.	Reason for filing code from the following table: NW New Well	42.	Barrels of oil produced during the test				
	RC Recompletion CH Change of Operator (Include the effective date.)	43.	Barrels of water produced during the test				
	AO Add oil/condensate transporter CO Change oil/condensate transporter	44.	MCF of gas produced during the test				
	AG Add gas transporter	45.	Gas well calculated absolute open flow in MCF/D				
	CG Change gas transporter RT Request for test allowable (include volume	46.	The method used to test the well:				
	requested) If for any other reason write that reason in this box.		F Flowing P Pumping				
4.	The API number of this well		S Swabbing If other method please write it in.				
5.	The name of the pool for this completion	47.	The signature, printed name, and title of the person				
6.	The pool code for this pool		authorized to make this report, the date this report was signed, and the telephone number to call for puestions				
7.	The property code for this completion		about this report				
8.	The property name (well name) for this completion	<b>48.</b>	The previous operator's name, the signature, printed name, and title of the pravious 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				
<b>9</b> .	The well number for this completion						
10.	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.						

- 11. The bottom hole location of this completion
- 12. Lease code from the following table: F Federal

Federal State Fee Jicarilla

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J N U

L

Navajo Ute Mountain Ute Other Indian Tribe

- 13. The producing method code from the following table: F P Flowing 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.
- 16. MO/DA/YR of the C-129 approval for this completion
- 17. MO/DA/YR of the expiration of C-129 approval for this completion
- 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. Oil 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 POC (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 versical depth
- 29. Top and bottom perforation in this completion or casing shoe and TD  $\mu$  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, or 'MC' if there are mc  $\epsilon$  than three non-commingled completions in this well bore. 30.