

District I
PO Box 1988, Santa Fe, NM 87504-2088
District II
PO Drawer DD, Artesia, NM 88211-8719
District III
1000 Rio Brason Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Yates Petroleum Corporation 105 South Fourth Street Artesia, NM 88210		OGRID Number 025575
		Reason for Filing Code CH - effective 5-1-2001
API Number 30 - 0 05-62653	Pool Name Foor Ranch Pre-Permian/Foor Ranch Wolfcamp	Pool Code 76730/76750
Property Code 27998	Property Name Terra 35 State	Well Number 1

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
H	35	9S	26E		1980	North	660	East	Chaves

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Lee Code S	Producing Method Code F	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
147831	Agave Energy Co. 105 South Fourth St. Artesia, NM 88210	110333A	G	Unit H - Section 35-T9S-R26E

IV. Produced Water

POD	POD ULSTR Location and Description
110335D	

V. Well Completion Data

Spud Date	Ready Date	TD	PBT	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Rusty Klein*
Printed name: Rusty Klein

Title: Operations Technician

Date: Dec. 20, 2000 Phone: 505-748-1471

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

Title:

Approval Date: MAY 04 2001

If this is a change of operator fill in the OGRID number and name of the previous operator

Paul R. Habenicht
Previous Operator Signature

Paul R. Habenicht

Printed Name

Vice-President U.S. Production

Title

Date

HUNT OIL COMPANY

3/9/01

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

RECEIVED

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.

APPROVED

I.

Operator HUNT CIL COMPANY	Well API No. 30-005-62653
Address 1445 ROSS AT FIELD, DALLAS, TEXAS 75202	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
EFFECTIVE DATE 1/5/93	
If change of operator give name and address of previous operator PACIFIC ENT. OIL CO., USA, 4245 KEMP, SUITE 600, W.F., TX 76308	

II. DESCRIPTION OF WELL AND LEASE

Lease Name TERRA 35 STATE	Well No. 1	Pool Name, Including Formation FOOR RANCH PRE-PERMIAN	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>H</u> : <u>1980'</u> Feet From The <u>NORTH</u> Line and <u>660'</u> Feet From The <u>EAST</u> Line Section <u>35</u> Township <u>9S</u> Range <u>26E</u> , <u>NMPM</u> , <u>CHAVES</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> PHILLIPS PETROLEUM COMPANY	Address (Give address to which approved copy of this form is to be sent) 4001 PENBROOK, ODESSA, TEXAS 79762					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> TRANSWESTERN PIPELINE COMPANY	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1188, HOUSTON, TEXAS 77251					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 35	Twp. 9S	Rge. 26E	Is gas actually connected? YES	When? 7-24-89

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size <u>ported ID 3</u> <u>1-15-93</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF <u>Chg op</u>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Stan Smith
STAN SMITH OPERATIONS MGR.
Printed Name Title
Date 12-28-92 817 692-3003
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 12 1993

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.