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

## State of New Mexico nergy, Minerals & Natural Resources Department

Form C-104 M Revised October 18, 1994 M Instructions on b

District II

811 South First, Artesia, NM 88210

OIL CONSERVATION DIVISION 2040 South Pacheco

	Instructions on back					
Submit to Approp	riate	District Office				
		5 Copies				

District III

1000 Rio Brazo District IV	s Rd., Aztec,	, NM 87410		Santa	i Fe,	NM 87	505				MENDED DEDODT	
2040 South Pac			EUD Y	A VIVOLLL	r TC A	א תוא.	ימים או	ነው የ ፊኒ	ማሳኔ፣ ጥረ ጥር		MENDED REPORT	
I.				ALLUW ABI	LE M	MD AC	HOK	IZAI	ION TO TR	OGRID Nu		
TIDE WEST OIL COMPANY									023067			
6666 S. SHRIDAN, SUITE 250 TULSA, OK 74133							-	,	Reason for Fil	ing Code		
								CG Ei	ffective	10-1-95		
30 - 0 05-	API Number -62672					Pool Nam	_	61			* Pool Code	
PECOS SLOPE ABO, S						Property Na					\$ 82130	
15579 PENJACK FEDERAL						110pti.	HII.				Well Number	
II. 10 S		Location										
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UL or lot no.		Hole Loca	Range	Lot Idn	r-n f.	al., _	T 31:516-				ne County	
OD OF RELIE	Section.	1 O M H STRIP	wanke	Lot lan	reet 11	rom the	North/So	uth line	Feet from the	Feet from the East/West line		
12 Lse Code F	13 Producir	ng Method Cod	ie <sup>14</sup> Gas	Connection Date	15	C-129 Perm	it Number	1	1 C-129 Effective I	Date 11 C-129 Expiration Date		
III. Oil a		Transport	ers		1			<u></u>				
Transpor	rter		Fransporter and Addres			<sup>31</sup> PO	POD 21 O/G 22 POD ULSTR Location					
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V. Well (	Complet	ion Data			<del></del>	<del></del>				······································		
<sup>27</sup> Spud			eady Date		<sup>27</sup> TD		²* PBT	TD OT	2º Perfora	tions	™ DHC, DC.MC	
··												
·	31 Hole Size		31 (	Casing & Tubing	Size		33 ]	Depth Se	et	S H	acks Cement	
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VI. Well	Test Dat	ta			<del></del>		·					
3º Date Ne		3 Gas Deli	very Date	" Test	Date		34 Test Length		Tbg. Pressure		" Csg. Pressure	
41 Choke	41 Choke Size 41 Oil 42 Water		ter		" Gas		45 AO	F	* Test Method			
"I hereby ceruf with and that the knowledge and b Signature: Printed name:	belief	es of the Oil Co given above ista	Line and com	Division have been of opplete to the best of	complied my	Approve	OII	L COI ORIGII DISTR	NSERVATI NAL SIGNED RICT II SUPEI	ON DIVI	ISION V. GUM	
Title:		<u></u>	·		<del></del>	Approva	il Date:		DEC 07	1995		
PRODUCTION ANALYST  Date: 11-29-95 Phone: (918) 488-8962									DLO O &			
		rator fill in the		mber and name o		revious oper:	ator					
<del></del> -	Previous O	perator Signatu	NFG.				<del></del>					
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## 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.
- Reason for filing code from the following table:

  NW New Well

  RC Recompletion

  CH Change of Operator (Include the effect AO Add oil/condensate transporter CO Change oil/condensate transporter AG Add gas transporter CG Change gas transporter RT Request for test allowable (Include the effect ADD) 3.

or filing code from the following table:
New Well
Recompletion
Change of Operator (include the
Add oil/condensate transporter
Change oil/condensate transporter
Add gas transporter
Change gas transporter
Request for test allowable (include volume requested)
other reason write that reason in this have

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
- The property name (well name) for this completion 8.
- 9. 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. If the
- The bottom hole location of this completion
- Lease code from the following table:
  F Federal
  S State
  P Fee
  J Jicarilla 12.

NU

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 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.
- MO/DA/YR of the expiration of C-129 approval for this 17. completion
- 18. The gas or oil transporter's OGRID number
- 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.
- 21 Product code from the following table: O G 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 POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- MO/DA/YR drilling commenced 25.
- 26. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well
- 28. Plugback vertical depth
- 29. Top and bottom perforation in this completion or casing shoe and TD if 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 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. 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
- MO/DA/YR that the following test was completed 37.
- 38. Length in hours of the test
- 39. Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
- 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
- 46. The method used to test the well: F Flowing
  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