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Previous Operator Signature				ou (D) (* A)	od hamse of the	previous operator					

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IF TI TAM	HIS IS AN AMENDED REPORT. CHECK THE BOX LABLED ENDED REPORT" AT THE TOP CF THIS DOCUMENT	2.						
Repo	rt all gas volumes at 15.025 PSIA at 60°. rt all oil volumes to the nearest whole barrel.	2:						
	ueet for allowable for a newly drilled or deepened well must be mpanied by a tabulation of the deviation tests conducted in rdence with Rule 111.	2.						
All se new	ctions of this form must be filled out for allowable requests on and recompleted wells.	24						
Fill oc chang other	ut only sections I, II, III, IV, and the operator certifications for see of operator, property name, well number, transporter, or such changes.	25						
A	parate C-104 must be filed for each pool in a multiple	26						
		27						
improj operat	perly filled out or incomplete forms may be returned to	28						
1.	Operator's name and address	29						
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.						
3.	Reason for filing code from the following with	31.						
		32.						
	CH Change of Operator							
		33.						
		* 1.						
		The						
	nequest for test allowable (lockude values	con						
	If for any other reason write that reason in this box.	34.						
4.	The API number of this well	36.						
5.	The name of the pool for this completion	36.						
6.	The pool code for this pool	37.						
7.	The property code for this completion	38.						
8.	The property name (well name) for this completion							
9.	The well number for this completion							
10.	The surface location of this security to the							
	for the location use that humber being being a Lot Number							
	and the ood drift is iter.	42.						
11.	The bottom hole location of this completion	43						

- 12. Lease code from the following table:
 - Federal State Fee 8 P

 - Ň
- Fee 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
- 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
- MO/DA/YR of the expiration of C-129 approval for this 17.
- 18. The gas or oil transporter's OGRID number
- Name and address of the transporter of the product 19.
- The number assigned to the POEI from which this product will be transported by this transporter. If this is a new well or recompletion and this POD his 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 wells impletion location and a short description of the POD (Examine) "Battery A", "Jones CPD", etc.) 22.
- 23 The + The Parameter of the storage from which water is moved from corporty. If this is a new well or recompletion and this has no number the district office will easign 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
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26
- 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 9,
- 0 Inside diameter of the well bore
- Outside diameter of the casing and tubing 11.
- 2. Depth of casing and tubing. If a casing liner show top and bottom
- Number of sacks of coment used per casing string

he following test data is for an oil well it must be from a test onducted only after the total volume of load oil is recovered.

- 4. MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 6.
- MO/DA/YR that the following test was completed 6.
- 7. Length in hours of the test
- 8.
- Flowing tubing pressure oil wells Shut-in tubing pressure ges wells
- Flowing casing pressure oil wells Shut-in casing pressure gas wells),
- Dismeter of the choke used in the test ١.
- Barrels of oil produced during the test
- Barrels of water produced during the test
- MCF of gas produced during the test 43.
- 44. Gas well calculated absolute open flow in MCF/D
- The method used to test the well: F Flowing P Pumping S Swabbing If other method please write it in. 45.
- 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 48.
- 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 longe operates this completion, and the date this report was signed by that person 47.