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Title: President Date: 10/20/97 "If this is a change of operator fill in the OGRUD number and name of the previous operator	Printed name:	Josep	h J. Kel	ly ly			Title:					UM	
Date: 10/20/97 Previous Operator fill in the OGRID number and name of the previous operator Trevious Operator Signature District bit	Title:						Appro			11	9 1.01	<u>.</u>	
" If this is a change of operator fill in the OGRID number and name of the previous operator Previous Operator Signature	Date: 10	•		Phone:	(505)623 -	3190		<u> </u>					
Previous Operator Signature Printed Name Title Date		and the second se	perator fill In				vious op	erniur					
Trevious Operator Signature Printed Name Title Date					·		· · · · · · · · · · · · · · · · · · ·						
		. (TY10U	opernior Sh	gitmt (I FE			Pr	inted Name			Title	Date	

	C-104	Instruct
	THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED MENDED REPORT" AT THE TOP OF THIS DOCUMENT	:
Rep	ort all gas volumes at 15.025 PSIA at 60°. ort all oil volumes to the nearest whole barrel.	
Are	quest for allowable for a newly drilled or deepened well must be ompanied by a tabulation of the deviation tests conducted in ordance with Rule 111.	:
All a new	ections of this form must be filled out for allowable requests on and recompleted wells.	2
Fill c char othe	out only sections I, II, III, IV, and the operator certifications for iges of operator, property name, well number, transporter, or r such changes.	2
A s com	eparate C-104 must be filed for each pool in a multiple	2
lmpr oper	operly filled out or incomplete forms may be returned to	2
1.	Operator's name and address	2
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	3
З.	Renson for filing code from the fallow to the	3
	RC Recompletion	3
		0.
	AO Add oll/condensate transporter CO Change oll/condensate transporter AG Add ges transporter	3:
	CG Change gas transporter	Tł
	termented for test allowable linclude volume	Co
4.	If for any other reason write that reason in this box.	34
5.	The API number of this well	36
6.	The name of the pool for this completion.	36
1.	The pool code for this pool The property of the pool	37
8.	The property code for this completion	38
9.	The property name (well name) for this completion	39
10.	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 fill survey location.	40
	for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.	41
11.	The bottom hole location of this completion	42
12.	Lease code from the fallout the state	43
	S State	44
	P Fee J Jicarilla N Nevajo U Ute Mountain Ute I Other Indian Tribe	46
13,	The producing method code from the following table: F Flowing P Pumping or other artificial lift	46.
14.	MO/DA/YR that this completion was first connected to a gas transporter	47.
15.	The permit number from the District approved C-129 for this completion	-47,
10	· ····	

MO/DA/YR of the C-129 approval for this completion 17.

MO/DA/YR of the expiration of C-129 approval for this

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: **Ö**il
 - 0 G

16.

- Gas

- T' a 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 easign 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", ato t 24. Well com... {Example: " Tank",etc.}
- 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
- 29. Top and bottom perforation in this completion or casing shoe and TD if openhole
- 30. Inelde diameter of the well bore
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 32. ы.
- Number of eacks of cement used per casing string

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.

- MO/DA/YR that new oil was first produced 4.
- MO/DA/YR that gas was first produced into a pipeline 15.
- MO/DA/YR that the following test was completed 8.
- 7. Length in hours of the test
- 8.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 9.
- O. Diameter of the choke used in the test
- 1 Barrels of oil produced during the test
- Barrels of water produced during the test 2.
- MCF of gas produced during the test 3.
- 4.
- Gas well calculated absolute open flow in MCF/D 5.
 - The method used to test the well:

Flowing Pumping Swabbin P

- S Swabbing If other method please write it in.
- The signature, printed name, and litle 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
- 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