DISTRICT I

PO Box 1980, Hobbs, NM 88241-1980

DISTRICT II

811 South First, Artesia, NM 88210

1000 Rio Brazos Rd, Aztec, NM 87410

STATE OF NEW MEXICO

Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco

Submit to Appropriate District Office RECEIVED

222324Regist d February 10, 1994

5 Copies

DISTRICT IV Santa Fe, NM 87505 AMENDED REPORT OCD - ARTESIA 2040 South Pacheco, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSP. 1. Operator Name and Address OGRID Number Elk Oil Company 7147 P. O. Box 310 3. Reason for Filing Code Roswell, New Mexico 88202-0310 4. API Number 5. Pool Name 6. Pool Code 30-0 05-63178 FOOR RANCH, PRE PERMIAN GAS 76730 7. Property Code 8. Property Name 9. Well Number 3971 JAN STATE 10. Surface Location П. UL or Lot No. Township Range Lot Idn Feet From The North/South Line Feet From The East/West Line County 36 8 South 26 East 660 North 1650 East Chaves 11 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 В 36 8 South 26 East 660 North 1650 East Chaves 12. Lse Code Producing Method Code 14. Gas Connection Date 15. C-129 Permit Number 16. C-129 Effective Date 17 C-120 Fm Date

| | 1 | | 13: 0 125 I dilita I dalloci | Id. C-129 Effective | e Date 117. C-129 Exp Date |
|--------------------------|-------------------------------------|--------|------------------------------|---------------------|---|
| S | F | 4/1/99 | | | |
| II. Oil and Ga | as Transporters | | | | |
| 18. Transporter OGRID | 19. Transporter Name and Address | | 20. POD | 21. O/G | 22. POD ULSTR Location and Description |
| | AGAVE ENERGY C | OMPANY | | | |
| | 105 SOUTH FOURTH STREET | | 2817967 | G | |
| | ARTESIA, NEW MEXICO 88210 | | | | |
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IV. Produced Water

| 23. POD | 24. POD ULSTR Location and Description |
|---------|--|
| | |

V. Well Completion Data 25. Spud Date 26. Ready Date 27. TD 28. PBTD 29. Perforations 10/11/98 4/1/99 6365 6335 6246-6289 30. Hole Size 31. Casing & Tubing Size 32. Depth Set 33. Sacks Cement 12 1/4 8 5/8 1035 450 SXS 7 7/8 5 1/2 6365 425 SXS

| VI | Well | Test | Data |
|------|--------|-------|------|
| 4 T. | AA CII | I COL | Data |

| 34. Date New Oil N/A | 35. Gas Delivery Date 4/1/99 | 36. Test Date 1/14/99 | 37. Test Length 24 hrs | 38. Tbg. Pressure 260 | 39. Csg. Pressure PKR |
|-------------------------|---------------------------------|--------------------------|------------------------|--------------------------|--------------------------|
| 40. Choke Size 16/64 | 41. Oil O | 42. Water O | 43. Gas 400 | 44. AOF | 45. 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.

OIL CONSERVATION DIVISION

SPERVISOR, DISTRICT H Signature Approved By: Joseph Kelly Printed name President Approval Date: 505-623-3190 Date

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

Previous Operator Signature

Printed Name

Title

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.

- Operator's name and address 1.
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- Reason for filing code from the following table:
 NW New Well
 RC Recompletion 3.

NW RC CH

ÃO CO

AG CG

Change of Operator
Add oil/condensate transporter
Change oil/condensate transporter
Add gas transporter
Change gas transporter
Request for test allowable (include volume requested)

If for any other reason write that reason in this box.

- The API number of this well 4
- The name of the pool for this completion 5
- The pool code for this pool 6.
- The property code for this completion 7.
- The property name (well name) for this completion R
- The well number for this completion 9.
- 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. 10
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:

Federal

SP State Fee

Jicarilla

NU

Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table: 13.

Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a 14. 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 completion
- The gas or oil transporter's OGRID number 18.
- 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.
- Product code from the following table:
 O Oil
 G Gas 21.

- 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 24. Tank",etc.)
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26.
- Total vertical depth of the well 27
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Inside diameter of the well bore 30.
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and 32.
- Number of sacks of cement used per casing string 33.

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 34.
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 37. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- 41. Barrels of oil produced during the test
- Barrels of water produced during the test 42.
- MCF of ass produced during the test 43.
- Gas well calculated absolute open flow in MCF/D 44.
- 45. The method used to test the well:

Flowing

Pumping 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 46
- The previous operator's name, the signature, printed name, 47. 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