## State of New Mexico Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham Governor

Sarah Cottrell Propst Cabinet Secretary

Todd E. Leahy, JD, PhD Deputy Secretary Adrienne Sandoval, Division Director Oil Conservation Division



## Operator Notice Regarding C-104 Denial and Request for Information

OCD is providing notice to operators that it will deny your C-104 – *Request for Allowable and Authorization to Transport* if it fails to provide complete and accurate information, including:

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Test Allowable, New Well and Recompleted Well

- □ C-103 (or BLM equivalent) for all casing strings
  - □ Spud Notice
  - □ Surface Casing
  - □ Intermediate Casing (if applicable)
  - □ Additional Intermediate Casing (if applicable)
  - □ Production Casing or Liner
- □ Applicable Order (NSL, NSP, Other \_\_\_\_\_
- Deviation Survey for Vertical Wells
- **Z** Directional Survey
  - C-102 (As-Drilled Plat for Horizontal Well)

## New Well and Recompleted Well Only

- □ C-103 Completion Sundry (or BLM equivalent)
- □ C-105 Completion Report (or BLM equivalent)
- □ All Logs Run on Well

The sale or transport of product without an approved C-104 violates the Oil and Gas Act and the implementing rules, including 19.15.7.15 and 19.15.16.19 NMAC. If OCD determines that your C-104 is incomplete or inaccurate, it will give you notice to resubmit your C-104 within 30 days. Failure to comply with this notice may result in enforcement action.

## If you have any questions, please contact the local OCD District Office.

1220 South St. Francis Drive • Santa Fe, New Mexico 87505 Phone (505) 476-3460 • Fax (505) 476-3462 • www.emnrd.state.nm.us/ocd



District I 1625 N. French Dr., Hobbs, NM 8 District II			Energy, Minerals & Natura Respurces								Form C-104 Revised August 1, 2011			
811 S. First St., A District III 1000 Rio Brazos District IV								propriate District Office						
1220 S. St. Francis Dr., Santa Fe, NM 87505   Santa Fe, NM 87505     I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT														
<sup>1</sup> Operator name and Address <sup>2</sup> OGRID Number														
COG Op		•										229137		
2208 W. Artesia,				<sup>3</sup> Reason for Filing							ing Co	g Code/ Effective Date		
API Numb		0210	5 Pool Name							RT ol Code				
30-025-45			<sup>5</sup> Pool Name WC-025 G-09 S243532M; WOLFBONE									98098		
<sup>7</sup> Property Code											<sup>9</sup> Well Number			
	742		Fez Federal Com									705H		
II. <sup>10</sup> Su														
Ul or lot no. M	Sectio		wnship Range Lot Idn Feet from the North/South Line Feet from the East 25S 35E 280 South 420							ast/West line County West Lea				
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F		Code F		Da	ate						222 Dapration Daily			
III. Oil a		as ira	nspor	ters		<sup>19</sup> Transpor	tor Name						<sup>20</sup> O/G/W	
OGRID	ler					and Ad							0/0/11	
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			10 Destra Drive Ste 2500									n n an		
·			Midland, TX 79705											
278421			Holly Refining and Marketing										0	
		PO Box 159 Artesia, NM 88210									ł			
						Aitesia, N	VI 0021V							
IV. Wel					~				1					
<sup>21</sup> Spud Da 1/9/19	ite		Ready	Date	'  ( z	<sup>23</sup> TD 22,679'	<sup>24</sup> PBTI 22,525			erforatio 60-22,5			<sup>26</sup> DHC, MC	
<sup>27</sup> H	ole Size			** Casing	g & Tubn	ng Size	<sup>29</sup> D	epth Se	et			<sup>30</sup> Sac	cks Cement	
17 1/2"				-	13 3/8"		1115'				950			
1/1/2			13 3/8"				1115				,			
12 1/4"			9 5/8"				11,761'				3440			
8 1/2"			5 1/2"			22,669*						4300		
			2 7/8"				11,929'							
V. Well							1 14				16 m n 16 m m			
<sup>31</sup> Date New Oil <sup>32</sup> Ga		as Delivery Date		33 ,	Test Date	<sup>34</sup> Test Length		h	<sup>35</sup> Tbg. Pressure		sure	<sup>36</sup> Csg. Pressure		
<sup>37</sup> Choke S	ize		<sup>38</sup> Oi	1	3	<sup>9</sup> Water	40	Gas					<sup>41</sup> Test Method	

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gnature: Amanda Avery   inted name: Title:   Amanda Avery Approval Date:   tle: Approval Date:   Regulatory Analyst Imail Address:	been complied with	and that the information give	en above is true and	OIL CONSERVATION DIVISION					
inted name: Title:   Amanda Avery Approval Date:   Regulatory Analyst Approval Date:	complete to the best	of my knowledge and belief							
Amanda Avery Amanda Avery   tle: Approval Date:   Regulatory Analyst Approval Date:   mail Address: Approval Date:	Signature: Ama	nda Avery		Approved by:					
tle: Approval Date: Regulatory Analyst mail Address:	Printed name:	V		Title:					
Regulatory Analyst	Amanda Avery								
mail Address:	Title:			Approval Date:					
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	E-mail Address:								
	Date:	Phone:							
2/4/19 575-748-6962	12/4/19	575-748-696	52						