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

District II

State of New Mexico

Energy, Minerals & Natural Resources Departmin ECEIVED

Form C-104 Revised October 18, 1994

811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION 11 20 20 Submit to Appropriate District Office

Instructions on back

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District III	Rd., Axtec	. NM 87410			2040 South Pacheco 5 Copi								
												NDED REPOR	
I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT													
						¹ OGRID Number							
Basin		ince	./			1687							
PO Box		0041	ν							Reason for Filing Code 43 bbls skim oil			
Hobbs I	NM 8	8241			* Pool Name				of ©3 - 09 • Pool Code				
30 - 025-28083			SWD;	~					96101				
Property Code				* Property Na	roperty Name				* Well Number				
288 25-46				AJ] /				1 /				
	urface .	Location Township	Range	Lot.ldn	Fact f	rom the	North/Sout	h I Eal	Feet from the	East/We		Country	
						2310 N			2310	E 025		County	
G	33	18S Hole Lo	JUL I			,10	N		2310	,		UZS	
					Feet	Feet from the North/		outh line Feet from the		East/West line County		County	
												•	
12 Lee Code	13 Producis	g Method (Code H Gas	Connection De	ie i	C-129 Permi	t Number .		C-129 Effectiv	e Date	" C-1	129 Expiration Date	
III. Oil and Gas Transporters													
			Transporter	» POI		n O/G	²² POD ULSTR Location						
OGRID Vella W		II. Ma	and Address Active Keey Outfield Sene. X 580							and Description			
012426 P.O. Box			289		2808	2808474 0							
e Calora	H-	bbs,	NN 88	241									
037008	3 2e	NEX O	PERATING	co		2808	474	0					
P.O. Box 308 Hobbs, NM 88241													
					35		100 PM	1. S. C.					
								3.500					
	30300					an man na mana ma	and the second second	a ny mry y					
IV. Produced Water													
IV. Produc		ter				* POD ITT	STP I continu						
POD ULSTR Location and Description													
V. Well Co	omplet	ion Data	a					-					
			Ready Date 7			≥ PBTD		39 Perforations		» DHC, DC,MC			
									<u>.</u>				
31 Hole Size			- " C	asing & Tubin		33 Depth Set			M Sacks Cement				
										 			
		·	_										
													
VI. Well T	D												
VI. Well To Date New			Pelivery Date	77	t Date								
	-	GES 1 .	cavery Date	1	t Date		Test Lengt	th	"Thg.	Pressure		⁴⁶ Cag. Pressure	
41 Choke Si	ize	43 Oil		N O	4) Water		44 Gas		4 AOF		* Test Method		
											1	I est Merrood	
47 I hereby certify the with and that the in-	that the rule	s of the Oil	Conservation Di	vision have been	complie	×d					<u> </u>		
with and that the information given above is true and complete to the best of my knowledge and belief							OIL CONSERVATION DIVISION						
Signature: Anaegale In							Approved by:						
Printed name: Hugo NAEGE/E JR.							Title: PETPOLEUM ENGINEER						
Tille: Vice President						Approval	Approval Date: 111 2 1 2000						
Date: Phone: 505-392-5999							101 - 12007						
" If this is a char	ige of oper	ator fill in t	he OGRID num	aber and name	of the p	revious operat	er er					,	
		perator Sign		-									

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. 2.
- 3. .

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator (Include the effective date.)

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested)

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
- 8. The property name (well name) for this completion
- 9. 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 '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 State Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe

- 13. The producing method code from the following table: Flowing Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a 14. gas transporter
- 15. The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 16.
- . 17. MO/DA/YR of the expiration of C-129 approval for this
 - 18. The gas or oil transporter's OGRID number
 - 19. Name and address of the transporter of the product
 - 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 her me number the district office will essign 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", atc.) 24. (Example: 'Tank",etc.)
- MO/DA/YR drilling commenced 25.
- 26. MO/DA/YR this completion was ready to produce
- 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. 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.

- 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 ar bottom. 33.
- 34. Number of sacks of cement used per casing string

If the following test data is for an oil well it must be from a ter-conducted only after the total volume of load oil is recovered.

- 35. MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 36.
- **37**. MO/DA/YR that the following test was completed
- 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 wat 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 reprezentative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 48.