District 1 PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994 Instructions on back opriate District Office

District II

Previous Operator Signature Tay Will TS

Bil South First District III				2	040 S	VATION outh Pach	neco	ON	Subi	nit to App	propri	ate District Offi 5 Copi		
1000 Rio Brazo District IV				Sa	anta F	e, NM 87	/505				AME	ENDED REPOR		
2040 South Pac I.				LLOW	ABLE	AND A	JTHOR	IZAT	ION TO T	RANSP	ORT			
Operator name and Address											² OGRID Number 162499			
NOVY OIL & GAS, INC. 125 N. Market St., Suite 1230											3 Reason for Filing Code			
Wichita, KS 67202-1712									CH Eff. 6.1-9			1		
' API Number							⁵ Pool Name			* Pool Code				
30 - 0 25-23467			-Vada	sand; A	160			46709						
Property Code -009063 22079			Star 695 Ltd.				operty Name			* Well Number				
II. 10	Surface			11 11-		Al-	North/South Line			I E-c-/02/				
F	Section 4	Township 9S	Range 35E	Lot.Idn		from the	North		Feet from the 1980	West line		County Lea		
	Bottom 1			<u> </u>										
UL or lot no.	,	Township		Lot Idn LOCATI			North/South line		Feet from the East/We		est line County			
12 Lse Code F	13 Produci	ng Method (Code 14 Gas	Connection	Date	15 C-129 Perm	nit Number	,	C-129 Effective	Date	17 C-1	29 Expiration Date		
	L													
III. Oil a			rters "Transporter	Nama		» PC	ND.	21 O/G		22 BOD IVI C				
	OGRID		and Address			r	U U	O/G	22 POD ULSTR Location and Description					
21778		Sun Refining & Market P.O. Box 2030, Tulsa,					0 0							
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	7.5						1101.00		1					
V. Produ	iced Wa	ter												
23	POD				" POD UI	STR Location	on and D	escription						
2081650					 									
V. Well (Completi	,				 -								
Spud	Date	_	Ready Date		r TD		* PBT	D	** Perfora	tions	30	³⁰ DHC, DC,MC		
	31 Hole Size		n C	asing & Tub	ing Size	1	³³ Depth Set			³⁴ Saci		us Cement		
												- Culian		
	·													
I. Well Date Ne	Test Dat													
Date Ne	A Off	³⁶ Gas Delivery		y Date "Test			* Test Length		" Tog. Pro	essure	" Cag. Pressure			
41 Choke	Size	⁴¹ Oil		40 Wa			4 Gas		~ AOF		** Test Method			
							023		AU	•		Test Method		
I hereby certify with and that the	y that the rule	s of the Oil (Conservation Divisions of the comp	vision have be	en compli	ed	OII	- CO	ICEDIIA					
knowledge and b Signature:	elief.		·		n or my			. CON	ISERVATI	ON DIV	VISI(ON		
	7.	and he	2//	loc	/	Approve	¹ by: O∺		SIGNED BY			MS		
Frank E. Novy							Tide: DISTRIST + SUPERIVISOR							
Date: 6/4/97 Phone: (316) 265-4651							Approval Date: 401 1 4 1997							
6/4/														
Petr	oleum F	roduct	ne OGRID num ion Mana	per and nan gement,	ie of the p	revious opera – #0175	tor 526		 					

Printed Name

Larry W. Miller Vice President 6/04/97

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.

- 1. Operator's name and address
- 2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- 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. 3
- 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:

- rederal
 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.
- 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.
- 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.
- Product code from the following table:
 O Oil
 G Gas 21. Oil Gas
- 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 wall 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 Tank", etc.) 24.
- 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
- 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. 30.

- Inside diameter of the well have
- 32. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 33.
- Number of sacks of cement used per casing string

If 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.

- 35. MO/DA/YR that new oil was first produced
- 36. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 37
- 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
- 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: P Pumping
 S Swabbing
 If other method please write it in. owing
- 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 47.
- 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 48.