District II

Form C-104 Revised February 10, 1994

Instructions on back Submit to Appropriate District Office

10 Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztoc, NM 87419

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe. NM 87504-2088

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- 1	AMENDED	DEDADT
- 1	MATCHINED	KEFUKI

5 Copies

District IV				Salla F	e, NM	6/304	-2088				AME	NDED REPOR	
PO Ba <b>x 2083, S</b> I.			FOR AL	LOWABI	LE AN	D AU	THOR	IZATI	ON TO TE	RANSI	PORT		
Operator name and Address								OGRI	1 OGRID Number				
Eclipse Oil & Gas, Inc. P. O. Box 15122								<u> </u>	9386				
Odessa, Texas 79768 - Ch									04/01/98				
	JI Number		$\neg \mathcal{L}$	7-7-18	C V. I	Pool Name			1 1		· F	Pool Code	
30 - 0 25			//Bagl	ey Perm			North 03820						
Property Code 22582  23286  Tenneco Sunshin						roperty Name					' Well Number 002		
		Location								7			
U or lot no.	Section 01	Township 12S			Feet from 810	1 '			Feet from the	East/West line		с <del>мыу</del> Lea	
11 ]	Bottom	Hole Loc	ation			<del></del>	<u> </u>	<del></del>		<u> </u>			
UL or lot mo.	Section	Township	Range	Lot Idn	Feet from	the	the North/South line		Feet from the	1		County	
P	01	12S	32E		810	·	South		660	East		Lea	
12 Lie Code P	Produc	ing Method Co P		Onnection Date /01/89	" c-	129 Perm	ut Number	,	* C-129 Effective	Date	17 C-1	129 Expiration Date	
III. Oil a													
	"Transporter OGRID		Transporter Name and Address			" POD " O/G		" O/G	<sup>11</sup> POD ULSTI and Descri				
01569		Navajo P. O. B		ng	25	599010 0		0	I-01-1	L2S-3	2S-32E		
			, NM 88211-0159										
			JOA IJOJ			599030 G			I-01-12S-32E				
		Tulsa,	OK 7410	01									
	eine e die				Saran	Xan in Santa		S. Sarana a					
			····										
Magazan Assas	W 4.4				Alia Co						•		
IV. Prod	uced W	ater		<del></del>	*****								
	POD		T 01 1	00 205		POD UI	LSTR Loca	tion and l	Description				
02599		tion Data	1-01-1	2S-32E									
V. Well	ud Date	non Data	<sup>14</sup> Ready Da	te	···	r TD	1		" PBTD			' Perforations	
			inday bak					1515	1 (1101 818)				
	14 Hole Size	:	<sup>11</sup> Casing & Tubing Size			" Depth S			d .		<sup>23</sup> Sacks Cement		
	- <del></del>				······································								
	•												
			<del> </del>			-							
VI. Well	Test D	ata		**			·····						
<sup>™</sup> Date ?	M Date New Oil M Gas Delivery Date		» Tes	* Test Date		<sup>17</sup> Test Length		" Tog. P	remons re	mentre H Cag. Pressure			
" Choke Size		41	Oil 4 Water		aier	<sup>d</sup> Gas		- A	OF	Test Method			
" I hereby cert	ify that the r	ules of the Oil (	Conservation Di	vision have been	n complied							701	
with and that the knowledge and Signature:	belief.	thad	0	victe to the best	of my	Approv			NSERVAT	1. 174	JIVIS.	ION	
Printed name:		ichard	<u> </u>			Title:	<b>,</b> -		e en		<del>,</del>		
Title:	D	resider		<del></del>		Approv	ai Date:	1AY	<u> </u>		<u></u>		
Deta: 4	1/ <b>1</b> 4/9			5/550-8	818								
"If this is a	change of or	xplora	oorin au	ber and name	of the prev	ious eper () ()	3675						
		Operator Signs	<u> </u>	<del>-</del>	T ^ ~	Print	led Name -	<del></del>	D	Cida	ille -	Date 3/24/98	
	Spal	Coo	K		J 0 e	Coo	· K			side	1.1 L	3/44/90	

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 despended 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

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.

separate C-104 must be filed for each pool in a multiple

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.
- Reason for filing code from the following table: NW New Well 3.

NCHOOGGT ACACRT

Recompletion
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.

- 4. The API number of this well
- 5. The name of the pool for this completion
- The pool code for this pool 6.
- 7. The property code for this completion
- 8. The property name (well name) for this completion
- 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
- Lease code from the following table: 12.

SP

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
- The permit number from the District approved C-129 for this completion 15.
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR of the expiration of C-129 approval for this 17.
- 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 th 22. well completion location and a short description of the POI (Example: "Battery A", "Jones CPD",etc.)
- The POD number of the storage from which water is move from this property. If this is a new well or recompletion an this POD has no number the district office will assign number and write it here. 23.
- The ULSTR location of this POD if it is different from to well completion location and a snort description of the PO (Example: "Battery A Water Tank", "Jones CPD Water 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
- Top and bottom perforation in this completion or casir shoe and TD if opennole 29.
- 30. Inside diameter of the well bore
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top ar 32.
- 33. Number of sacks of cement used per casing string

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

- 34. MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 36.
- 37. Langth 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
- 42. Barrels of water produced during the test
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- 45. The method used to test the well:

Flowing Pumping

Swapping

If other method please write it in.

- The signature, printed name, and title of the spreauthorized to make this report, the date this report signed, and the telephone number to call for question about this report 46.
- The previous operator's name, the signature, printed name and title of the previous operator's representat authorized to verify that the previous operator no long operates this completion, and the date this report we signed by that person 47.