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

State of New Mexico
Energy, Minerals & Natural Resources Department

20 Drawer DD, Artesia, NM 88211-0719 District III

OIL CONSERVATION DIVISION

Form C-104 Revised February 10, 1994 Instructions on back t Office

CONSERVATION DIVISION	Submit to Appropriate District
PO Box 2088	5
Santa Fe, NM 87504-2088	

000 Rio Brazo district IV				Santa	Fe, NM	8750	4-2088				3 Copies AMENDED REPORT		
O Box 2088, S			FOR A	LLOWA	BLE AN	JD AU	THOR	17.ATT	ON TO TE				
Man		C	perator na	me and Addre	200	12 110	11101	12/11	ON TO II	OGRID I			
Manzano Oil Corporation P.O. Box 2107											013954		
Roswell, NM 88202-2107							Reason for Filing Code						
⁴ API Number							CO effective 2/1/96						
30 - 0 25-29833 Cuerno Large										* Pool Code 14980			
⁷ Property Code						Property Name				' Well Number			
	<u>,314</u>									1.			
I. 10 S	Section	Location Township											
I	25	108	32E	Lot.ldn	Feet from			Feet from the	East/West				
		Hole Loca	1	<u> </u>	198	O South		uth	660	Eas	t Lea		
UL or lot no.		Township	Range	Lot Idn	Feet from	n the	North/S	outh line	Feet from the	East/West	line County		
		·							i oca i i oca i i i c	Zasovica	County		
12 Lae Code	13 Produci	ng Method Code	14 Gas	Connection D	ate "C	-129 Peru	it Number	. "	C-129 Effective	Date	17 C-129 Expiration Date		
S	P	10/7/32											
II. OII a		Transporte	TS ransporter l	, V									
OGRID		•	and Addres			" PC	OD	31 O/G		POD ULST			
138648	Amo	oco Pipel	ine In	tercorp	orate	123361	10	0					
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	uced Wa	ater				W 200 10							
						~ คบม บา	LSTR Loca	tion and D	escription				
7. Well	Complet	tion Data								 	······		
¹¹ Sp	ud Date		2 Ready D	ate		"TD "PBTD "Perforations					11 Perforations		
													
	Hole Size			" Casing & Tubing Size				11 Depth Set			33 Sacks Cement		
							·	<u></u>					
	7.1							· · · · · · · · · · · · · · · · · · ·					
I. Well	Tost D												
Date N		" Gas Deli-	very Date) H 7	Test Date		11 70 . 1		1				
		3-2-2-	,	'	cat Date		" Test Le	ength	H Tbg. P	ressure	" Cag. Pressure		
" Choke Size		" C	" Oil " Water			" Gas		" AOF		" Test Method			
44 I hereby certi with and that th	ify that the ru he information	ales of the Oil Co n given above is t	nscreation I	Division have b	cen complied		0	II CO	NICEDIA	TON DE	TIOXOX T		
knowledge and Signature:	belief.				2. 0. m,				NSERVAT				
Round town and					Approved by: ORIGINAL STOCKED OF FOREY SENTENDED DISTRICT LAGISLAGE OR								
Allison Hernandez					Title:								
D .		ng Techni				Approv	nl Date:			FEB	0 7 1850		
	5/96				3-1996								
"If this is a c	cpanse of ob	erator fill in the	OGRID nu	mber and nar	ne of the pre	vious aper	nlor						
	Previous (Operator Signate	ire			Prin	ted Name			Title	Date		
											Dan		

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.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include New Well
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
- 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.
- The bottom hole location of this completion
- Lease code from the following table: 12.

S P

Federal State Fee Jicarilla

Navajo Ute Mountain Ute Other Indian Tribe Ň

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

13.

- 14. MO/DA/YR that this completion was first connected to a 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.
- 17. MO/DA/YR of the expiration of C-129 approval for this completion
- 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:

- The ULSTR location of this POD if it is different from the 22. well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.)
- 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 Tank", etc.) 24
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26.
- 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. Inside diameter of the well bore
- 31. Outside diameter of the casing and tubing
- 32 Depth of casing and tubing. If a casing liner show top and bottom.
- 33. Number of sacks of cement used per casing string

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.

- 34 MO/DA/YR that new oil was first produced
- 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
- 42. Barrels of water produced during the test
- 43. MCF of gas produced during the test
- 44. Gas well calculated absolute open flow in MCF/D
- 45. 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 was signed, and the telephone number to call for questions about this report 46.
- 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 47.