State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994



811 South First, Artesia. NM 88210

Previous Operator Signature

OIL CONSERVATION DIVISION

Submit to Appropriate District Office

District III			2040 South Pacheco							5 Copies	
1000 Rio Brazo District IV	s Rd., Aztec.	. NM 87410		Santa	a Fe, N	IM 875	505			AMENDED REPORT	
2040 South Pac					, , , , , ,				_		
I.	R	EQUES.				ID AU	THORIZAT	ION TO T			
Operator name and Address MARALO, INC.						0140			OGRID Number		
P. O. BOX 832						•				3 Reason for Filing Code	
MIC	XLAND, TX	79702	ē					RC TO SWD	11/16/98		
1						Pool Name	e		° Pool Code		
			SMD; BOUGH "C"					96097			
ŀ	горегту Code i333	·	Property Name BARNES "20" SMD						' Well Number		
		Location		DAMES 20	JAD	·	 		1		
Ul or lot no.					Feet from	the	North/South Line	Feet from the	Feet from the East/West line County		
C 20		9S 35E			766						
11 Bottom Hol					700		NORTH	2201	WEST	LEA	
UL or lot no.		Township	Range	Lot Idn	Feet from	n the	North/South line	Feet from the	East/West	line County	
										,	
12 Lse Code	1	ng Method C	ode 14 Gas	Connection Date	: "C	-129 Perm	it Number	" C-129 Effective	Date	17 C-129 Expiration Date	
P SWD											
III. Oil a											
" Transpo OGRID			17 Transporter Name and Address			* PO	D 21 O/G	22 POD ULSTR Location and Description			
015694	AYAJO REF	JO REFINING COMPANY 29			2771	SKIM O	C-20-9S-35E				
						322622 3000		0 20 33 33E			
St. Common Co.	()	ARTESIA, I	WH 88210		32.55	Market Sec	de sendid 1200 film	<u> </u>			
W. Anna W. W. W.					, 2000	************	(XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	_			
							Anna Care				
						ta labahan k					
	576.543					a	7/8/302 (AC \$10) N. 194				
IV. Prod	uced Wa	ater			24						
	POD					[™] POD UI	STR Location and	Description			
		tion Data	1								
RECOMPLETED TO SWD			Ready Date		n TD	* PBTD		INJ. "Perfo	rations	» DHC, DC,MC	
11/09/98			11/16/98				12,565'	9740 -	- 9754'	-	
31 Hole Size			¹¹ Casing & Tubing Size				¹³ Depth S	et	· · · · · · · · · · · · · · · · · · ·	M Sacks Cement	
17-1/2"			13-1/2"				450 '		450 SXS	CLASS C	
12-1/4"			8-5/8			4200 '		2600 SX		HOMCO LT + 200 SX.	
7-7/8"			5-1/2*				12635'		850 SXS	POZ + 425 HONCO LT	
									TAILED W	/925 SXS 50/50 POZ	
	Test Da										
15 Date New Oil		M Gas D	elivery Date	³⁷ Tes	77 Test Date		" Test Length	· " Tbg.	Pressure	* Csg. Pressure	
"Choke Size		4 OI								;.	
, Choke 5224		•	4 Off	" " W	^a Water		" Ges	[™] AOF		" Test Method	
" I hereby cen	ify that the m	les of the Oil	Conservation F	Division have been	\ 00==1: '						
with and that the	he information	given above	is true and com	plete to the best of	of my		OIL CO	NSERVA?	יות אסו	VISION	
Signature:		Of				Apnro			-	. 101011	
Signanure: Denother Lagar Printed name:							Approved by:				
DOROTHEA LOGAN Tide:							Title:				
REGULATORY ANALYST							il Date:	9 7 1999			
		R 22, 199		(915) 684-74		<u> </u>					
I II tun ma	cnange of op-	erator fill in t	he OGRID nu	imber and name	of the pre-	vious oper	ator				

Printed Name

Title :

Date

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.

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

 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: Federal State State
 Fee
 Jicarilla
 Navajo
 Ute Mountain Ute
 Other Indian Tribe
- 13. The producing method code from the following table: Howing Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a 14.
- 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.
- MO/DA/YR of the expiration of C-129 approval for this 17.
- 18. 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.
- 21. Product code from the following table:
 O Oil
 G 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 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", and I 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
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.

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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 areas 30.

- 31. Inside diameter of the well bore
- Outside diameter of the casing and tubing 32.
- 33. Depth of casing and tubing. If a casing liner show top and bottom.
- 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.

- MO/DA/YR that new oil was first produced
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37. MO/DA/YR that the following test was completed
- 38 Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas well 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: Flowing Pumping 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 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.