									. 7.				
District I 1625 N. French	ı Dr., Hobbe	, NM 88240	State of New Mexico Energy, Minerals & Natural Resources						Form C-10 Revised March 25, 199				
District II 811 South First, Artesia, NM 88210			OIL CONSERVATION DIVISION						Submit to Appropriate District Offic				
District III 1000 Rio Brazo	os Rd., Azte	c. NM 87410	2040 South Pacheco						5 Copie				
District IV 2040 South Pag	·	•	Santa Fe, NM 87505						AMENDED REPOR				
I.			FOR AL	LOWABLE	AND	AUTH	ORIZA	TION	TO TRAN	SPORT	•		
Manz	ano Oi	1 Corpor	'Operator name and Address ration						² OGRID Number 013954				
P.O. Box 2107 Roswell, NM 8820			2-2107						³ Reason for Filing Code AG				
⁴ API Number			Echol Wolf cam Pool Name Northea						5+-11-1-00 *Pool Code				
30 - 0 25-32750 ⁷ Property Code				t WOl	R-11475 97017 mm 'Well Number								
	16113		"SV" Sundown State									1	
II. IV S			Range	et from t	m the North/South Line			Feet from the	East/West line County				
м			37E			477 S		uth	191	We	West Lea		
II Bottom Hole Lo		Hole Loc			ad finan	t from the		uth line	Feet from the	East/West line County		County	
M	M 14 10S		37E		477		North/South line South		191	Wes	st	Lea	
¹¹ Las Code	¹³ Produc	ing Method Co		Connection Date	n C	-129 Permi	t Number		C-129 Effective	Date	" C	129 Expiration Date	
S P 7/18/00 III. Oil and Gas Transporters													
¹⁸ Transporter OGRID		¹⁹ Transporter Name and Address			²⁰ POI)	²¹ O/G	²² POD ULSTR Location and Description					
		Refining Company			28148	314893 0							
P.O. Dr Artesia													
024650 Dynegy I			1idstream Services 2			8261	D37 G						
#6 Dest Midland		#6 Desta 1idland,	a Drive, Ste 3300 , TX 79705							э.			
						·							
IV. Produ	ced Wat	ter			····	* POD UL	STR Local	tion and D	escription				
28148	94											·	
V. Well Completion Data			Ready Date	³⁸ PBTD			29 Perfor			¹⁰ DHC, MC			
Sput Date		Ready Date	TD	- PBID			renor			DAC, MC			
³¹ Hole Size			**	e .	³³ Depth Set					³⁴ Sac	ks Cement		
VI. Well 7					· · ·			、	1				
³⁶ Date New Oil ³⁶ Gas		³⁴ Gas D	Delivery Date 37 Test Date			³⁴ Test Longth		³⁹ Tbg. Pressure			* Csg. Pressure		
41 Choke Size			¹² Oil ⁴³ Water			⁴⁴ Gas		* AOF			** Test Method		
				have been complied			0	IL CO	- NSERVAT	ION DI	VISI	ON	
that the information given above is true and complete to the best of my knowledge and belief. Signature: A AA + + + + + + + + + + + + + + + + +													
Printed name: Allison Hernandez							Title:						
Title: Engineering Technician							Approval Date:						
Date: 7/20/00 Phone: (505)623-1996													
Previous Operator Signature Printed Name Title Date													
						<u> </u>							

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New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "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

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. 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 volume requested) 3. R1 Request for test anowable (include 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. The property code for this completion. 7. 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. If the 11. The bottom hole location of this completion. Lease code from the following table: F Federal S State P Fee J Jicarilla N Navajo U Ute Mountain Ute I Other Indian Tribe 12. The producing method code from the following table: Flowing Pumping or other artificial lift 13. MM/DD/YY that this completion was first connected to a gas transporter. 14. The permit number from the District approved C-129 for this completion. 40. 15. MM/DD/YY of the C-129 approval for this completion. 16. 17.
- MM/DD/YY of the expiration of C-129 approval for this completion. 18.
- The gas or oil transporter's OGRID number.
- Name and address of the transporter of the product. 19. 20.
- 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.

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 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.
- Top and bottom perforation in this completion or casing shoe and TD if openhole. 29
- Write in DHC' if this completion is downhold commingled with another completion or MC' if there is more than one non-commingled completion in this well bore. Attach actual completed well bore diagram 30.
- 31. Outside diameter of the casing and tubing.
- Depth of casing and tubing. If a casing liner, show top and bottom. 32.
- Number of sacks of cement used per casing string. 33.

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. MM/DD/YY that new oil was first produced.
- 35. MM/DD/YY that gas was first produced into a pipeline.
- 36. MM/DD/YY 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.
- 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: F Flowing Dumping 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.

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