PO Box 1988, Hobbs, NM 82241-1988 District II PO Drawer DD, Artesia, NM 82211-8719 District III			9	State of New Mexico Energy, Minerale & Nataral Resources Department					Form Revised February 10,		
	dae, NM 87410	:	OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088					Instructions on Submit to Appropriate District ( 5 C			
	, Santa Fe,	NM \$7564-2089	TEOD								
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	le Size		<sup>11</sup> Casing & Tubing Size		Size	<sup>11</sup> Depth					
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1		i Conserva i Instructio	ition Divi me
-	THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED	22	2. 1
A	eport all oil volumes at 15.025 PSIA at 60°.		i l
A 80	request for allowable for a newly drilled or deepened well must be companied by a tabulation of the deviation tests conducted in cordance with Rule 111.	23	l. T fr tř
	ll sections of this form must be filled out for allowable requests on we and recompleted wells.	24	Ŵ
	I out only sections I, II, III, IV, and the operator certifications for anges of operator, property name, well number, transporter, or her such changes.	25.	le Ta Mi
A Ca	esparate C-104 must be filed for each pool in a multiple	20.	
Im	properly filled out or incomplete t	27.	Ta
	properly filled out or incomplete forme may be returned to pretore unapproved.	28.	Plu
1. 2.	Operator's name and address	29.	Toj eho
	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.	Inei
3.	NW New Wat from the following table:	31.	Out
	HC Recompletion CH Change of Operator AO Add olivition dependen	32. 🤇	' Dep bott
	AQ Add dae transporter	33.	Nun
	RT Request for test allowable Unclude values	The f condu	ollowing loted on
	if for any other reason write that reason in this box	34,	MO
4. 	the API number of this well	35.	MO
<b>5</b> .	The name of the pool for this completion	36,	MOA
6.	The pool cade for this pool	37.	Leng
7. 8.	The property code for this completion	38.	Flow Shut
9.	The property name (well name) for this completion The wall number for this completion	39,	Flowi Shut
10.	The surface location of this completion NOTE: If the	40.	Diam
	tinited States government survey designates a Lot Number for this location use that number in the 'UL or lat no.' box. Citherwise use the OCD unit latter.	41.	Barrel
11.	The bottom hale location of this completion	42.	Barrai
12.	Lises gode from the fallout and the	43.	MCF a
	8 State	44,	Qae w
	J Jicarilla N Navalo	46.	The m F P
	i Other Indian Tribe		B If other
13,	The producing method code from the following table:	46.	The el

- Flowing Pumping or other artificial lift è 14.
- MO/DA/YR that this completion was first connected to a 15.
- The permit number from the District approved C-129 for this completion 16.
- MC/DA/YR of the C-129 approval for this completion 17.
- MC/DA/YR of the expiration of C-129 approval for this
- The gas or oil transporter's OGRID number 18 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.
- 21.
- Proclust code from the following table: O Oil G Gae

- T' e ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Exemple: "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 seeign a number and write it here.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD [Exemple: "Battery A Water Tank", "Jones CPD Water Tank", etc.]
- AO/DA/YR drilling commenced
  - NO/DA/YR this completion was ready to produce
- otal vertical depth of the well
- lugback vertical depth
- op and bottom perforation in this completion or casing toe and TD if openhole
- eide diameter of the well bore
- utelde diameter of the casing and tubing
- pth of casing and tubing. If a casing liner show top and
- imber of sacks of cement used per casing string

g test deta is for an oil well it must be from a test nly after the total volume of load oil is recovered.

- /DA/YR that new oil was first produced
- DA/YR that gas was first produced into a pipeline
- /DA/YR that the following test was completed
- gth in hours of the test
- wing tubing pressure oil wells t-in tubing pressure gas wells
- ving casing pressure oil wells t-in casing pressure gas wells
- neter of the choke used in the test
- ele of oil produced during the test
- ie of water produced during the test
- of gas produced during the test
- well calculated absolute open flow in MCF/D
  - nethod used to test the well:
  - Flowing Pumping Swabbing er method please write it in.
- The signature, printed name, and title of the person suthorized 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 pravious 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

