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District I PO Box 1980, Hobbs, NM 88241-1980			-1960	State of New Mexico						Form C-104 Revised February 10, 1994				
District II PO Drawer DD, Artesia, NM 88211-0719				OIL CONSERVATION DIVISION						Instructions on back Submit to Appropriate District Office				
District III 1000 Rio Brazos Rd., Aztec, NM \$7410					-	30x 20 NM 875		5 Copies						
District IV PO Box 2008, S	WU KO BARDO Kd., ARCC, NM \$7410 Santa Fe, NM 87504-2088 Santa Fe, NM 87504-2088													
I.			UEST				AND A	AUTHO	RIZAT	ION TO TF				
Floyd	Operat	-1-10		•	me and Addres	*		_		¹ OGRID Number				
711 Lo	uisian	na S	Suite	1740					00794 Resson for	Filing				
Housto			77002					CH-Change Effect		erat /1/9				
⁴ API Number 30 - 0 41-00189				⁴ Pool Name Allison Penn									Pool Code	
' Property Code				¹ Property Name								' W	Vell Number	
15178		27		State BPA								2		
II. ¹⁰ S Ul or lot no.	Surface		waship	Range	Lot.Idn	Feet	from the	North/S	South Line	Feet from the	East/West	t line	County	
F	32	ĺ	085	37E			1980	Nort	:h	1980	West		Roosevelt	
	T		le Loca								1	·		
UL or lot no.	Section	T	ownship	Range	Lot Idn	Feet	from the	North/S	South line	Feet from the	East/West	t line	County	
" Lac Code		icing M	icthod Cod	ic ¹⁴ Gas /	Connection Dat	 140	¹⁴ C-129 P	ermit Numbe		C-129 Effective I	Date	" C-	129 Expiration Date	
S III Oilan	P nd Car													
III. Oil a	rier	5 11a		Transporter N		<u> </u>	10	POD	²¹ O/G	1	¹ POD ULS			
017407		Petro	Sourc	and Address			058	7410	0	and Description G 32 TO8S R37E				
017407 Petro Sour 9081 Westh Houston, T			Westhe	eimer Ste. 900						(State V-23)				
024650				roleum (058	7430	G	G 32 T08S R37E				
ý. A v c	P	PO Bo	ox 1589 a, OK	9	,					(State V-23)				
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IV. Produ	uced W	Vater					4 bot			- 1 at	·			
587450							- rou) ULSTR Loca		Heripuon				
	Compl	etion	Data		·	·								
- Spi	ud Date			²⁴ Ready Da	ile		מר ״	I T		" PBTD			" Perforations	
	Hole Si	1¢		" C	Lasing & Tubin	ng Size			¹¹ Depth Set	ι	<u>_</u>	²⁰ Sack	e Cement	
								<u> </u>						
					<u></u>	<u> </u>					·			
	Test I	Data	·				k			l	<u></u>			
¹⁴ Date N	vew Oil		¹⁴ Gas Deli	livery Date	¹⁴ Te	est Date		" Test L	ength	× Tbg. Pr	CASU PE		³⁷ Cag. Pressure	
" Choke Size		41 (4 Oil 4 Wat			ler ^d Gas			4 AOF		 	4 Test Method		
4 thempy cert	the that the		City Oll C		Division have been		<u> </u>					<u> </u>		
	he informat				plete to the best		lica	С	IL CO	NSERVAT	ION DI	IVIS	ION	
Signature:		Ľ	1 1L	top	- /		App	Approved by:						
Printed name: GREG FOX Title: Manager of Production								Tiuc:						
Title:	jër ot produ		,			proval Date:		S N U	S. H. W. C. R.					
	change of	operato	r fill in th	Phone: 7	1.3/222-6									
BISON H	PETROL	EUM	CORPOR	RATION			e O. B.	arthel		Pr	esident		12/20/95	
OGRID-	Previous Operator Signature Printed Name Title Date													

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	New Mexico Oil C-104	Conservat o	on Divini-
	THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED	22	T' • ULBTR location of this POD if it is different from the well completion location and a short description of the POD (Forward 1) Thetered 2).
_ M	port all gas volumes at 15.025 PSIA at 60°. port all oil volumes to the nearest whole barrel.	23	(Example: "Battery A", "Jones CPD", etc.) The POD number of the storage from which water is moved from this property. If this is a specific multiple storage in the storage from
	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.		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.
. (10	sections of this form must be filled out for allowable requests on w and recompleted wells. out only sections I, II, III, IV, and the operator certifications for	24.	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.)
CII	anges of operator, property name, well number, transporter, or ser such changes.	25.	MO/DA/YR drilling commenced
A	separate C-104 must be filed for each pool in a multiple npletion.	26. 27.	MO/DA/YR this completion was ready to produce Total vertical depth of the well
Imp ope	properly filled out or incomplete forms may be returned to prators unapproved.	28.	Plugback vertical depth
1.	Operator's name and address	29.	Top and bottom perforation in this completion or casing shoe and TD if openhole
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.	Inside diameter of the well bore
З.	Reason for filing code from the following table:	31.	Outside diameter of the casing and tubing
1	NW New Well RC Recompletion CH Change of Operator	32.	Depth of casing and tubing. If a casing liner show top and bottom.
	AO Add oil/condensate transporter CO Change oil/condensate transporter	33.	Number of sacks of cament used per casing string
	AG Add gas transporter CG Change gas transporter RT Request for test allowable (Include volume	The condu	ollowing test data is for an oil well it must be from a test cted only after the total volume of load oil is recovered.
	requested) If for any other reason write that reason in this box.	34.	MO/DA/YR that new oil was first produced
4.	The API number of this well	35.	MO/DA/YR that gas was first produced into a pipeline
5.	The name of the pool for this completion	36.	MO/DA/YR that the following test was completed
6.	The pool code for this pool	37.	Length in hours of the test
7.	The property code for this completion	38.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
8. 9.	The property name (well name) for this completion	39.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
10.	The well number for this completion	40.	Diameter of the choke used in the test
	The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location that we had worked by the survey of the survey designates a lot the survey of the sur	41.	Barrels of oil produced during the test
	for this location use that number in the 'UL or lot no.' box.	42.	Barrels of water produced during the test
11.	The bottom hole location of this completion	43.	MCF of gas produced during the test
12.	Lease code from the following table: F Federal	44.	Gas well calculated absolute open flow in MCF/D
	S State P Fae J Jicarilla	45.	The method used to test the well: F Flowing
	N Navajo U Ute Mountain Ute		P Pumping S Swabbing If other method please write it in.
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift	46.	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
14.	MO/DA/YR that this completion was first connected to a gas transporter	47.	The previous operator's name, the elemeture, printed name
15.	The permit number from the District approved C-129 for this completion	·	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
16.	MO/DA/YR of the C-129 approval for this completion		ogned by that person
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		
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.		
21.	Product code from the following table:		
	G Gas		
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