District I PO Box 1946, Hobbs, NM 88241-1980 District II

NO Drawer DD, Artesia, NM 88211-6719 District III

District III 1000 Rio Brame Rd., Astec, NM 87410

State of New Mexico

Form C-104

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

	7 OTTT C TOA
	Revised February 10, 1994
	Instructions on back
Submit to	Appropriate District Office
	5 Copies

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strict IV Dex 2088, Se	nte Fe. Ni	A 27504-2022		Santa Fo	e, NM	8/304-20	58			ENDED REPORT	
, , , , , , , , , , , , , , , , , , , ,		EQUEST			E ANI	O AUTHO	ORIZA'	TION TO TR			
Operator name and Address								¹ OGRID Number			
Orbit Enterprises, Inc. c/o Oil Reports &aGas Services, Inc. P. O.						Box 755,			016530 Reseon for Filing Code		
Hobbs, New Mexico 88241							8 6 5 11			CH, CO	
20 0 41-10492						Pool Name			' Pool Code		
⁷ Pro	operty Cod	•	Chaveroo San Andres * Property Name						12049 'Well Number		
	15411	·			James			4			
. 10 S	Section	Location	Range	Lot.lda	Feet from t	ho I Nor	h/South Lin	e Feet from the	East/West line	County	
I	20	7s	33E	LACIUL							
		Hole Loc		<u> </u>	1979	.5 S	outh	660	East	Roosevelt	
UL or lot me.		Township	Range	Let Ida	Foot from	the Nor	th/South lin	e Feet from the	East/West line	County	
I	20	7s	33E		1979		outh	660	East	Roosevelt	
¹³ Lee Code P	" Produc	ing Method Co P	de "Gas	Connection Date	" C-1	29 Permit Nus	aber	" C-129 Effective !	Date "C	-129 Expiration Date	
		Transport						·			
"Transpor	rter	19	17 Transporter Name and Address			™ POD ¹¹ O/G		G	22 POD ULSTR Location and Description		
020445		curlock			19	53710	0				
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V. Prod	rod W	ater				POD ULSTR	T 1	d December			
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		tion Data									
E Spud Date			²⁴ Ready Date			"TO		* PBTD		3º Perforations	
	™ Hole Size		N Casing & Tubing Size			²¹ Depth S		Set	³³ Sa	33 Sacks Cement	
nue ozz			Casing to 1 doing State						·		
I. Well						T = ===				N.G. D.	
Hate New Oil		- Gas D	s Delivery Date 2 Test I		t Date	37 Test Length		* Tog. P	ressure	34 Cag. Pressure	
4 Cheke Size			Oil	Oil 42 Water		⁴ Gas		" A	OF	" Test Method	
" I benehv cost	ify that the	rules of the Oil	Conservation	Division have bee	a complied						
	be informati			npicte to the best			OIL C	ONSERVAT	IVID NOI	SION	
Signature:	Xa.	H	Olle	_		Approved by:		u signed by .		И	
Printed name:	Lar	en Holle	r			Title:		HENELEY I CUPE	RVISCIR		
Tile: Agent			_			Approval Date	Approval Date: JUL 2 9 1994				
Date:	7/28/9		Phone:	505) 393 - 2	727						
				mber and name		ious operator					
					Mu	rphy Ope		Corp.			
	Previou	s Operator Sign	LATE PE			Printed No	LEBE		Title	Date	

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 bar

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
- 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 volume requested)

If for any other reason write that reason in this box.

- The API number of this wall 4.
- 5. The name of the pool for this completion
- The pool code for this pool 6.
- 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
- Lease code from the following table: 12.

Federal State Fee

- ree Jicarilla Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: 13.

Flowing Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a gas transporter 14.
- 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.
- MO/DA/YR of the expiration of C-129 approval for this 17. 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:
 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.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 26.
- 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.
- Incide diameter of the well bore 30.
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 32.
- 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.

- MO/DA/YR that new oil was first produced 34.
- MO/DA/YR that gas was first produced into a pipeline 35.
- 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.
- Diameter of the choke used in the test 40.
- 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.

