## District I PO Box 1980, Hobbs, NM \$8241-1980

## State of New Mexico

Form C-104 Revised February 10, 1994

District II NO Drawer DD, Artesia, NM 88211-0719

Instructions on back Submit to Appropriate District Office
5 Copies

District III 1000 Rie Brazos Rd., Aziec, NM 87410 OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

1	<b>AMENDED</b>	REPOR

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Baz 2088, Santa Fe	, nm 17 RE(	OUEST	FOR AI	LOWABI	LE AND	AUT	HORI	ZATI	ON TO TR	ANSPORT	
<del></del>			Operator nam	se and Address						<sup>1</sup> OGRID Numb	ef
Orbit Ent				es. Inc.						016530	
P. O.	Box	755	·	•				ŀ	•1	Reason for Filing	Code
Hobbs	, New	Mexic	o 88241-	-0755						CH C	7-1-44
API Nu					· Poo	d Name				1	Pool Code
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1 Property	Cooe					-	•			1	007
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11 Bott	om H	ole Loc	ation	<u></u>							
Lor lot me. Sect		Township	Range	Lot Ida	Feet from t	•	North/So	uth line	Feet from the	East/West line	County
D 2	25	07S	32E		66		NORTH		660	WEST	Roosevelt
Lac Code 15 P	roducing	Method C	ode <sup>14</sup> Gas	Connection Dat	e " C-12	9 Permit	Number	·  "	C-129 Effective I	Date C	-129 Expiration Dat
F	P			2-16-68							
. Oil and (	Gas T				<del></del>	" POD " O/G " POD ULSTR Location					ocation
Transporter OGRID		•	Transporter and Address			- POL	<u> </u>	0,0	and Description		
20445			Permian	Corp.		7064	10	0	C-25-0	7S-32E	
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POD					34	POD UL	STR Loca	ion and	Description		
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										26 Sacks Cement	
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Date New	Oil	- 04	Delivery Date	•	icat Date						•
" Choke Si	re .		4 Oil	4	Water	_	₫ G	u.	4 /	OF	" Test Method
" I hereby certify to	hal the ru	ales of the C	il Conservation	Division have b	ocen complied			NI CO	ONSERVA'	עות אטוע	ISION
with and that the m knowledge and beli		T RIVER TOO	1	ompiete to the oc	at or my				JINGLIK VIII	11011 211	.0.04
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Laren Holler						Tide: Data CAR Add In Mack					
Title:						Approval Date: SEP 2 0 1994					
Distri	ent 04		Phone:	(505) 393	-2727	-		<u> </u>	1 2 V. LL.	<u> </u>	
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9/26/ "If this is a char	age of ep	erator fill i	n the OGRID	Bumber and has	me of the prev	your ebe	rator				
				number and na	me of the prev		ren H	oller		Agent Title	9/26/94 Da

## 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 pearest 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.

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.
- 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 well 4.
- Б. The name of the pool for this completion
- 6. The pool code for this pool
- The property code for this completion
- 8. The property name (well name) for this completion
- The well number for this completion 9.
- 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:
  F Federal
  S State
  P Fee
  J Jicarilia
  N Navejo
  U Ute Mountain Ute
  I Other Indian Tribe 12.

- 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 14. gas transporter
- 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
- 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.
- 26. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well
- 28. Plugback vertical depth
- 29. Top and bottom perforation in this completion or casing shoe and TD if openhole
- 30. Inside diameter of the well bore
- 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
- 35. MO/DA/YR that gas was first produced into a pipeline
- 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.
- 40. 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
- 44. Gas well calculated absolute open flow in MCF/D
- The method used to test the well:

  F Flowing
  P Pumping
  S Swabbing
  If other method please write it in. 45.

- 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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