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

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994 ıck

District II

| 811 South First, Artesia. NM 88210<br>District III<br>1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV |                         |  |                                    | 204   | ATION DIVISION<br>th Pacheco<br>NM 87505                      |                             |                  | Submit to Appropriate District Office 5 Copies |                                     |           |                                     |                    |  |
|---|-------------------------|--|------------------------------------|---|---|-----------------------------|------------------|--|-------------------------------------|-----------|-------------------------------------|--------------------|--|
| I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT  Operator name and Address                        |                         |  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
| Saga Pe<br>415 W.   | troleum                 | n Limite   | O <del>perator n</del><br>ed Liabi | rname and Address<br>bility Company o <del>f Colorado</del> |   |                             |                  |  | <sup>2</sup> OGRID Number<br>148967 |           |                                     |                    |  |
| Midland   | TX 797                  | ,,,  |                                    |   |   |                             |                  | 3 Reason for Filing Code                       |                                     |           |                                     |                    |  |
| <sup>4</sup> API Number   |                         |  |                                    | <sup>5</sup> Pool Name                                      |   |                             |                  |  | CH 01/01/1997                       |           |                                     |                    |  |
| <b>30 - 0</b> 05-10080  |                         |  | Tobac                              | Pennsylv  |   |                             |                  |  | • Pool Code<br>59350                |           |                                     |                    |  |
| Property Code 20312   |                         |  | Now M                              | ovice BU  | Property Na   | me                          |                  |  | ' Well Numb                         |           |                                     |                    |  |
| <u> </u>  | Surface                 | Location   |                                    | Mexico BW State   |   |                             |                  |  | 001                                 |           |                                     |                    |  |
| Ul or lot no.   | ot no. Section Township |  | Range                              | Lot.Idn   | Feet fro  | m the North/South           |                  | uth Line                                       | Feet from the                       | East/West | line                                | County             |  |
| K 11 7  | 20                      | 88   | 33E                                |   | 18  | 374                         | Sou              |  | 2086                                | We:       | West Chaves                         |                    |  |
| UL or lot no.   | Bottom Hole Lo          |  | Range                              | 1   | Lot Idn Feet from   |                             |                  |  |                                     |           |                                     |                    |  |
|   |                         | 104115111  | Kange                              | Lot Idn   | Feet fro  | om the                      | n the North/Sout |  | Feet from the East/West line Cou    |           | County                              |                    |  |
| 12 Lse Code   | 1                       | ng Method C  | ode <sup>14</sup> Gas              | Connection Date   | Date 15 C-129 Pr  |                             | nit Number '     |  | C-129 Effective Date                |           | <sup>17</sup> C-129 Expiration Date |                    |  |
| S   | P                       | m  |                                    |   |   |                             |                  |  | _                                   |           | C- <u>1</u>                         | 23 Expiration Date |  |
| III. Oil a  | nd Gas                  | Transpor   |                                    | Cransporter Name  |   |                             |                  |  |                                     |           |                                     |                    |  |
| OGRID   |                         |  | and Address                        |   |   | » POI                       |                  | <sup>21</sup> O/G                              | <sup>12</sup> POD ULSTR Location    |           | cation                              |                    |  |
| KO  |                         | il Pipeline Company  |                                    |   | 2   | 065610                      |                  | 0  | 20-8S-33E                           |           |                                     |                    |  |
| 000445  | Da                      | 11as, T  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
|   |                         | urlock Permian Corp<br>). Box 4648   |                                    |   |   | 065610 0 20-8               |                  |  | 20-85-33                            | 3S-33E    |                                     |                    |  |
| Houston, 7  |                         | The state of the s |                                    |   | a la ser<br>a la serie  |                             |                  |  |                                     |           |                                     |                    |  |
| 024650 Warren   |                         | rren Pe  | etroleum                           |   |   | 065630 G                    |                  |  | 20-85-33                            | E         |                                     |                    |  |
|   | 134<br>Hou              | 3430 NW Freeway, Ste 1200<br>ouston, TX 77040  |                                    |   |   |                             |                  |  |                                     | _         |                                     |                    |  |
|   |                         |  | 77010                              |   |   | de y see ask                |                  |  |                                     |           |                                     |                    |  |
|   |                         |  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
| V. Produ  | iced Wa                 | ter  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
| n 1   | POD                     |  |                                    |   |   | " POD ULS                   | TR Location      | on and Do                                      | escription                          |           |                                     |                    |  |
| V. Well C   | Completi                | on Data  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
| Tompletion Data   |                         |  | Ready Date                         | ndy Date 27 TD  |   |                             | * PBT            |  | 20 10                               |           |                                     |                    |  |
|   |                         |  |                                    |   | -   |                             | - FBID           |  | 29 Perforati                        | ons .     | » DHC, DC,MC                        |                    |  |
| <sup>J1</sup> Hole Size   |                         |  | n C                                | asing & Tubing  | & Tubing Size   |                             | 33 Depth Set     |  |                                     |           | <sup>™</sup> Sacks Cement           |                    |  |
|   | ····                    |  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
|   |                         |  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
|   |                         |  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
| /I. Well  | Test Dat                | ·a   | <del></del>                        |   |   |                             |                  |  |                                     |           |                                     |                    |  |
| N Date Ne   |                         |  | livery Date                        | <sup>37</sup> Test  | Date  |                             | Test Leng        | -th  | ***                                 |           |                                     |                    |  |
|   |                         |  |                                    |   |   |                             |                  | jua.   | " Tbg. Pre                          | ļ         | •                                   | Cag. Pressure      |  |
| L'hoke Size   |                         | 42   | 42 Oil                             |   | 45 Water  |                             | " Gas            |  | 4 AOF                               |           |                                     | Test Method        |  |
| " I hereby certify  | y that the rule         | s of the Oil C   | onservation Di                     | vision have been o  |   |                             |                  |  | •                                   |           |                                     |                    |  |
| with and that the<br>knowledge and b  | HILL THE PROPERTY OF 1  | given above is   | true and comp                      | lete to the best of   | my  |                             | OIL              | CON  | ISERVATIO                           | אם אנ     | 7191/                               | ON                 |  |
| Signature:  |                         | []//.  | 2                                  |   | OIL CONSERVATION DIVISION  Approved by: Conservation DIVISION |                             |                  |  |                                     |           |                                     |                    |  |
| Printed name: J. Charles Farmer   |                         |  |                                    |   |   |                             | Tide: President  |  |                                     |           |                                     |                    |  |
| Title:  | anager                  | Co Tark  |                                    |   |   |                             |                  |  |                                     |           |                                     |                    |  |
| Date: 2   | /4/97                   |  | Phone: (9                          | 15) 684-4   | ļ   | Approval Date: MAR 0.7 1997 |                  |  |                                     |           |                                     |                    |  |
| If this is a cha  | enge of open            | stor fill in the   |                                    | ber and name of   |   | rions operat                | er<br>F          |  |                                     |           |                                     |                    |  |
| 4   | -                       | G 8  |                                    |   |   | <u>Y. M</u> e               | rchant           | , Pre  | sident                              |           |                                     | 2/4/97             |  |
| Penroc 0  | _                       | -  |                                    | : 017213  |   | Printed                     | Name             |  |                                     | Titie :   |                                     | Date               |  |

## New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CH. .. 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 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
- 2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator (Include the effective date.)

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) quest for test allowable (Include volume uested)

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

- The API number of this well
- 5. The name of the pool for this completion
- 6 The pool code for this pool
- 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. If the
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:
  F Federal
  S State

13.

Fee Jicarilla

SZ

- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: Flowing Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a 14.
- 15. The permit number from the District approved C-129 for this completion
- 16. MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this 17.
- 18. The gas or oil transporter's OGRID number
- Name and address of the transporter of the product 19.
- 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 24.
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26.
- 27. Total vertical depth of the well
- Plugback vertical depth 28.
- 29 Top:and bottom perforation in this completion or casing shoe and TD if openhole
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore.

- 31. Inside diam of the well bore
- 32. Outside dias er of the casing and tubing
- Depth of ca bottom. 33. ) and tubing. If a casing liner show top and
- 34. Number of a ts of cement used per casing string
- If the following test a conducted only after a is for an oil well it must be from a test total volume of load oil is recovered.
  - MO/DA/YR : : new oil was first produced
- 36. : gas was first produced into a pipeline MO/DA/YR 1
- 37. MO/DA/YR 1 the following test was completed:
- 38. Length in he of the test
- 39. Flowing tubi Shut-in tubis pressure - oii wells ressure - gas wells
- 40. Flowing casi Shut-in casi pressure - oil wells ressure - gas wells
- 41. Diameter of choke used in the test
- 42. Barrels of oil aduced during the test
- 43. Barrels of w
- produced during the test MCF of gas 44. duced during the test
- 45. Gas well cal ited absolute open flow in MCF/D
- 46 The method id to test the well: F Fla P Pu S Sw If other mett ng sing please write it in.

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- The signatu authorized to 47. printed name, and title of the person ake this report, the date this report was telephone number to call for questions signed, and about this re
- 48. The previous and title d authorized to operates this signed by the prator's name, the signature, printed name, the previous operator's representative trify that the previous operator no longer ampletion, and the date this report was