District I PO Box 1906, Hobbs, NM 88341-1996 District II

PO Drawer DD, Artesia, NM 96211-9719 District III

1000 Rie Brazes Rd., Aztec, NM 87419 District IV State of New Mexico

Energy, Massrah & Natzral Resources Department

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088 Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

District IV	e a e e N	~ # # 7 ##4 3##	<u> </u>			AME	ENDED REPORT					
PO Box 2008, S I.			ST FOR A			ID AUTHOR	RIZAT	TON TO TI			<u> </u>	
Operator name and Address PURVIS OPERATING CO.								131559				
P. O. BOX 11006 MIDLAND, TX 79702								*45 *OTHER DUI SWE	*450 BBLS OIL RECOVERED *OTHER DURING RECOMPLETION FOR SWD WELL			
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	Previous	s Operator Sig	ienature			Printed Name			Title		Date	
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New Mexico Ol Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT. CHECK THE SOX 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 despensed 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.
- Reason for filling 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) 3. request for less showable telecide vi requested)

 If for any other reason write that reason in this bex.
- 4.
- The API number of this well
- The name of the pool for this completion 5
- The pool code for this pool 6
- 7 The property code for this completion
- 8 The property name (well name) for this complition
- 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 kit no.' box. Otherwise use the OCD unit letter. 10
- The bottom hole location of this completion 11.
- Lease code from the following table:
 F. Federal
 S. State
 P. Fee
 J. Jicarilla
 N. Nevajo
 U. Ute Mountain Ute
 Other Indian Tribe 12
- The producing method code from the following table:

 F Flowing
 Pumping or other artificial lift 13
- MO/DA/YR that this completion was first connected to a 14
- 15 The permit number from the Dietrict approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 18.
- MO/DA/YR of the expiration of C-129 approval for this 17.
- 18 The gae or oil transporter's OGRID number
- Name and address of the transporter of the product
- The number sesigned 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. Product code from the following table:
 O Oil
 G Ges

- The ULSTR location of this POD II it is different from the well completion location and a short description of the POI (Example: "Bettery A". "Jones CPD", etc.] 22.
- The POD number of the storage from which water is move from this property. If this is a new well or recompletion an this POD has no number the district office will seeign number and write it here. 23.
- 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", "Jones CPD Water Tank", "Jones CPD Water Tank", atc.)
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- 27 Total vertical depth of the well
- 28 Plugback vertical depth
- 29. Top and bottom perforation in this completion or casing also and TD if openhole
- Incide diameter of the well bore 30
- 31. Outside diameter of the casing and tubing
- 32. Depth of casing and tubing. If a casing liner show top and bottom.
- Number of eacks of cament used per casing string 33

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.

- MG/DA/YR that new oil was first produced 34
- MO/DA/YR that gás was first produced into a pipeline 36.
- MO/DA/YR that the following test was completed 36.
- 37. Length in hours of the test
- 38. Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
- 39. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- 40. Diameter of the choke used in the test
- 41. Barrels of oil produced during the test
- 42 Barrele of water produced during the test
- 43 MCF of gas produced during the test
- 44. Gae well calculated absolute open flow in MCF/D
- 45. The method used to test the well: P Pumping

 Swebbing

 H 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 40.
- 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.