District I PO Box 1960, Hobbs, NM 88241-1960

State of New Mexico ergy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

10 Drawer DD, Artesia, NM 88211-6719

District II

OIL CONSERVATION DIVISION

Instructions on back Submit to Appropriate District Office
5 Copies

District III					O Box 2	U88					2 Cobies	
000 Rie Brazos	Rd., Aztec,	NM 87410		Santa F	e, NM 8	7504-2088	,			43.CE	NDED REPORT	
District IV PO Box 2082, Sa	Fo WW	97504-2000							اللا	AME	NDED REPORT	
-O BOX 2003, 24	ma se, am Di		T FOR A	TOWAR	I F AND	ATTHO	RIZATI	ON TO TR	ANSPO	RT		
I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator name and Address OGRID Number												
Wandan a	Marks and Garner Production, LTD. Co.											
				es, Inc.,					014070			
P. O. B	.5 & Ga	S Dervic	To add I/ID 'Reseas for Filing Code									
Hobbs,	-1-0 00	241	to operator name. Requested Ogrid # remain the same. Eff. 12/01/94									
	100 00	241	oi Name 'Pool Code									
'A			oi Name				Pool Code					
30 - 0 25-	23064		Baum Upper Penn					04940				
⁷ Property Code			¹ Property Name					* Well Number				
013981 Bau						C t t			,	001		
II. 10 Surface Location						State			<u></u>		/01	
				Lot.ida	Ford from the	t from the North/So		Feet from the	East/West line		County	
Ul or lot no.	Decrios	Township	Vande	Locate	Leer Hom m	i ivoirai		rea nom are	Esso we		County	
P 31		135	33E	1	660	sot	TH	660	EAST	·	LEA	
11 Bottom Hole Location												
UL or lot no.		Township		Lot Ida	Feet from t	North	South line	Feet from the	East/Wes	i line	County	
OL OF ROLEG.		1	'		17					1	-	
P	31	13S	33E		660	SOU		660	EAST		LEA	
11 Lee Code	¹³ Produci	ng Method	Code 14 Gas	Connection Dat	15 C-12	9 Permit Numb	er	C-129 Effective	Date	" C-	29 Expiration Date	
c	P		l									
S VVI O'll a		T										
III. Oil and Gas Transporters												
"Transporter OGRID			"Transporter			2 POD 2 O/G			22 POD ULSTR Location			
		and Address							and Description			
ΙΩ ΩΩ778 Ι΄		moco PL ITD				1961210	0	P-31	P-31-13S-33E			
32.23.855-55-55.75.55.55.55.55.55.55.55.55.55.55.55.5		502 N. W. Ave.				201210 F-31-135 -35H						
Level			and, Texas 79702									
	W	arren I	Petroleum	Corp.		1961230	۱	P-31-13S-33E				
024650 P. O.			Por 1500			1901230	0					
Tulsa,			OK 74102									
								1				
			200									
and the second	ominio.											
XXXXXXXXX	(0.86 To)				\$000,000	and the same of the	Norman C	e e				
IV. Produced Water												
POD VLSTR Location and Description												
	A 1		A		 							
V. Well		tion Da		···				<u> </u>				
11 Spud Date			²⁴ Ready Date			"TO		" PBTD		1º Perforations		
M Hole Size			11 Casing & Tubing Size			T	¹¹ Depth	Set		33 Sac	Sacks Cement	
					7	 						
				<u></u>					 			
								1				
				·. · · · · · · · · · · · · · · · · · ·		+						
<u></u>					··· · · · · · · · · · · · · · · · · ·						····	
						1						
VI. Wel	l Test D	ata									· · · · · · · · · · · · · · · · · · ·	
			D.# D.4	T 4-	D	7 7 7	1	N 75-	D		H Cag. Pressure	
Date	New Oil	_ G.	** Gas Delivery Date ** Test Date			" Test Length		2 Tbg. Pressure			Cig. Fremure	
" Che	ke Size		4 Oil 4 Water			4 Gas		" AOF			" Test Method	
			į							-		
			·		······································		,					
				Division have b	OIL CONCEDIVATION DIVICION							
knowledge an	[_	/ .	emplete to the be	OIL CONSERVATION DIVISION							
Signature:	, _	kellu	Approved by:									
Dag Hannet C.	n 8	recu	ORIGINAL SIGNED BY JORRY SEXTON									
Printed name	. /	n Hell	· · ·		Tide: DISTRICT I SUPERVISOR							
Tister	n Holle	3.5										
Title:	Agen	t				Approval Date:						
Date: 1.2	/14/94		Phone:	505) 393	-2727							
	manual e compete			sumber and nas		one appearance						
			~ ~ ~~ ~~ ~~ ~		vs use prev i							
ļ				,								
1	Previou	Operator i	pignature			Printed Na	ne '		n	itle	Date	

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 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

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 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 3.

Recompletion
Change of Operator
Add oil/condensate transporter
Change oil/condensate transporter
Add gas transporter
Change gas transporter
Request for test allowable (include volume requested)
If for any other reason write that reason in this box.

- 4. The API number of this well
- 5. The name of the pool for this completion
- 8. The pool code for this pool
- 7. The property code for this completion
- 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:

 - de from the followi Federal State Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe
- 13. The producing method code from the following table:
 - Flowing Pumping or other artificial lift
- 14. MO/DA/YR that this completion was first connected to a
- 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.
- 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.
- 21. Product code from the following table:
 O Oil
 G Gas

- 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", "Jenes 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: "Bettery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- Plugback vertical depth 28.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 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 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.
- 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
- 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