State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994 Instructions on back

District I PO Box 1980, Hobbs, NM 88241-1988 District II PO Drawer DD, Artesia, NM 88211-0719

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 AMENDED	DEDODE
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District III		M 88211-U/1		(OIL CON	PO B	lox 2088	}	ION	Sub	mit to A	рргорі	riate District Offi 5 Copi		
1000 Rio Brazo District IV					Santa	Fe, N	M 8750	4-2088] AM	ENDED REPOR		
PO Box 2088, S				R A	LLOWA	BLE A	AND A	JTHOR	TASE	TON TO T	RANS				
I. REQUEST FOR ALLOWABLE AND AUTHORIZ Operator name and Address										OGRID Number					
Marshall Pipe & Supply Company 12700 Preston Road - Suite 165										014193					
Dallas, Texas 75230										'Reason for Filing Code CO Effective date 12-1-97					
'AFT Number 30 - 0 41-20808 Tule Montoya						a a	⁵ Pool Nam	e .	' Pool Code 86442						
' Property Code 006588							Property No	Property Name			' Well Number				
		Location									<u> </u>				
Ul or lot no.	Section	Township	Rat	nge	Lot.lda	Feet fr	om the	North/So	uth Line	Feet from the	East/W	cet Lac	County		
J	27	2S	29E 1980		30	South 23			Ea	East Roosevelt					
UL or lot no.	Section	Hole Lo	$\overline{}$		Lot Ida	F (rom the	N .1.10		r					
Same		, ·		Æ €	200 100	real	rom the	North/So	MUN HIDE	Feet from the	East/W	est line	County		
12 Lee Code	⁽³ Produci	ng Method C	1		Connection Dat	le "	C-129 Perm	-	,	C-129 Effective	Date	" C.	129 Expiration Date		
P III. Oil au	F nd Gas	Transno		5-2-	-88		6-15-	88		6-15-8	8		**************************************		
Transpor	ter das		' Transp				²⁶ PO	D	11 O/G	1	POD UI	STR L	cation		
OGRID				Addres			10750	10				escriptic	_		
-033479		avajo 01 Eas			ng Co. St.,		12758	10	0						
	i				88210										
021168	Southbound Gas Co. 2720 Stemmons Freeway						1275830 G								
ener e e					Tower 75207					· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
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W D1	. 1 117				 :										
V. Produ	rop wa	iter					M POD UI	STR Locati	and D						
					•		.000	O I R EARCHL	UM 45845 D	escription					
		ion Data													
- Spu 4-1-	d Date	5	²⁴ Ready Date -24-86				"TO 7155		" PBTD " Perforations 7006 to 7042						
· · · · · · · · · · · · · · · · · · ·	Hole Size		" Casing & Tubing Size			Size	¹¹ Depth Se								
17-1	/2		13-3/8			300				250					
11			8-5/8				2185		675						
7-7/8			5-1/2			7153			200						
5-1				2-	-3/8			69	998						
VI. Well Date No.			elivery D)ata	¥ ~	t Date		71 00				· · · · ·			
_ 300 (16)/ (74)		O43 D	Delivery Date 7 Test		t Date	" Test Length		gth	M Tbg. Pressure			" Cag. Pressure			
4 Choke Size		4	41 Oil 42 Water		ater	45 Gas			" AOF			4 Test Method			
44 I hereby certif	v that the end	as of the Co	C-C												
with and that the	шопшинов	givça above	true and	d comp	vision have been dete to the best of	acomplies of my	d	OII	CON	NSERVATI	ON D	IVICI	ΩN		
knowledge and b Signature:	euci.		M	n	un		Approved	ORIĞİÎ Lby:	NAĒŠŔ DISTH	NSERVATI GNED BY OM NOT I BUPER	AIS WIL	LIAM	S		
Printed name:	Virgir	NI A TO			·		Title:				OF				
Virginia Lee Johnson Tide: Agent								Approval Date:							
Date: 3-11-98 Phone: 972-239-7284								1							
" If this is a ch		rator fill in ti	be OGRI	D num	ber and name	of the pr	evious operat	or							
	Previous O	perator Sign	ature				Printe	i Name							
				- 1							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 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 sesigned and filled in by the Dietrict 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 ges transporter

CG Change gas transporter

RT 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
- 6. The pool code for this pool
- 7 The property code for this completion
- 8. The property name (well name) for this completion
- 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:
 F Federal
 S State
 P Fee
 J Jicarilla 12.

Navajo Uta Mountain Uta Other Indian Triba

13. 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. gas transporter
- 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 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.
- 21. Product code from the following table:

- 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.)
- 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 essign 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.
- 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 denth
- Top and bottom perforation in this completion or casing shoe and TD if openhols 29.
- 30 Inside diameter of the well bore
- Outside diameter of the casing and tubing 31.
- 32. Depth of casing and tubing. If a casing liner show top and
- Number of eacks of cement 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.

- 34 MO/DA/YR that new oil was first produced
- 36 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
- **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 Gas well calculated absolute open flow in MCF/D
- **4**5. The method used to teet the well:

Pumping Swapbin

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.