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

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

5 Copies

District IV 2040 South Pack		Fe, NM 87505								لــا	-	ENDED REPORT	
[.			T FOR A			ID AU	JTHOR	ITAZL	ION TO TR				
Operator name and Address									² OGRID Number 159954				
Thomas		ources rd	Corp.						'Reason for Filing Code				
Monahans, Texas 79756										-1-97			
⁴ API Number ⁵ Pool Name									• Pool Code 96121				
30-0 25-00350 SWD; San Andres													
200	66 2/	1610	Property Name State "BH"						' Well Number 001				
I. 10 Surface Local Ul or lot no. Section Tow		Location			Feet from the		North/South Line		Feet from the	East/We	ا محنا مد	County	
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11 Bottom Hole Lo		1							<u> </u>				
UL or lot no. Section Townshi			Range	n the North/South line			Feet from the	East/We	est line	County			
Р	32	15S	32E	<u> </u>	99		Sout		330	Eas	East Lea		
12 Lae Code		cing Method Co WD	ode H Gas (Connection Da	te 15 C-	-129 Perm	nit Number		" C-129 Effective I)ate	" C-1	129 Expiration Date	
III. Oil and Gas Transporters													
" Transpor OGRID		19	30 POD 21 O/G			20	POD UL	STR Lo					
			and Address				602	0			Cate there	n	
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								-					
V. Produ	uced Wa	ater										·	
, n	POD				3	POD UI	LSTR Loca	tion and I	Description				
													
V. Well (7707					* ***				-		
B Spud Date		²⁴ Ready Date ²			" TD	" TD			2º Perfora	tions	1	» DHC, DC,MC	
· · · · · · · · · · · · · · · · · · ·	31 Hole Size	<u> </u>	n (Casing & Tubir	ng Size	33 Depth S					34 Suci	ks Cement	
			†		•6	Deput of			*		361	3 Canan	
						+-							
						+-							
						+							
VI. Well	Test Da	ata											
33 Date No	ew Oil	34 Gas De	Delivery Date	" Te	³⁷ Test Date		38 Test Length		" Tbg. Pr	ressure	\top	* Csg. Pressure	
41 (2) -1	<u> </u>	<u> </u>											
41 Choke Size		_	a Oil		43 Water		4 Gas	s	45 AO)F	Ţ	" Test Method	
47 1 hereby certif	fy that the n	ules of the Oil C	Conservation D	ivision have be	en complied						<u></u>		
with and that the knowledge and t	e information	in given above is	is true and comp	plete to the best	of my		O !	IL CO	NSERVATI	ION D	IVIS	ION	
Signature:		mor	7/	2	ļ	Approv	Approved by: ORIGINAL SIGNED BY CHRIS WILLIAMS						
Printed name:	Title: DISTRICT + SUPERVISOR												
Title:		Approval Date:											
Date: 9-2	<u>Pre</u> 2-97	sident	Phone:91	5 943-66	61								
"If this is a change of operator fill in the OGRID number and name of the previous operator OGRID# 159770 Synergy Oil & Gas, Inc.													
<u> </u>		Operator Signa	afure		Eric		ted Name	~		Tit		Date	
	<u> </u>	<u> </u>	10-1				LUCILLI	Ĺ	Pres	siden	ıt	8-27-97	

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 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 filing code from the following table:

 NW New Well

 RC Recompletion

 CH Change of Operator (Include the effect

 AO Add oil/condensate transporter

 CO Change oil/condensate transporter 3.

or filing code from the following account of the Well Recompletion Change of Operator (include the effective date.) Add oil/condensate transporter Change oil/condensate transporter Add gas transporter Change gas transporter Request for test allowable (include volume ranuested) requested)
If for any other reason write that reason in this box.

- The API number of this well 4.
- 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.
- The bottom hole location of this completion 11
- 12. Lease code from the following table:

SP

State Fee Jicarilla

Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table:

F Flowing
P Pumping or other artificial lift 13.

- 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.
- 17. MO/DA/YR of the expiration of C-129 approval for this
- 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.) 22.
- The POD number of the storage from which water is moved from this property. If this is a new well or recommertion 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. (Example: " Tank",etc.)
- 25. MO/DA/YR drilling commenced
 - MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth

26.

- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 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. 30.

- 31. Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and
- 34 Number of sacks of cement used per casing string

If 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.

- 35. MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 36
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39
- 40. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- 41. Diameter of the choke used in the test
- 42. Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44. MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- 46 The method used to test the well: F Flowing
 P Pumping
 S Swabbing
 If other method plea
 - se 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 47.
- 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 48.