

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural 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

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address JFG ENTERPRISE PO BOX 100 ARTESIA NM 88210		OGRID Number 011830
API Number 30 - 025-00525	Pool Name MALJAMAR GB-SA	Reason for Filing Code CHANGE PROPERTY NAME AND PROPERTY CODE EFFEC.10-26-94
Property Code 15688 15 777	Property Name FROM STATE O TO NEW MEXICO O STATE	Pool Code 43329
		Well Number 23

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
E	12	17S	32E		1980	NORTH	660	WEST	LEA

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	12	17S	32E		1980	NORTH	660	WEST	LEA
Lee Code S	Producing Method Code P	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
015694	NAVAJO REFINING COMPANY PO BOX 159 ARTESIA NM 88210	0706910	O	B-12-17S-32E

IV. Produced Water

POD	POD ULSTR Location and Description

V. Well Completion Data

Spud Date	Ready Date	ID	FBID	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

J. T. JACKSON

Title:

PARTNER

Date: 10-26-94

Phone: 505-746-9680

OIL CONSERVATION DIVISION

Approved by:

CHIEF OF OIL CONSERVATION DIVISION

Title:

CHIEF OF OIL CONSERVATION DIVISION

Approval Date:

OCT 28 1994

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

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EFFECTIVE: 9-1-94 ☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address JFG Enterprise P.O. Box 100 Artesia, N.M. 88211-0100		OGRID Number 011830
		Reason for Filing Code CH 9-1-94
API Number 30 - 0 25-00525	Pool Name Maljamar GB-SA	Pool Code 43329
Property Code 002558 15688	Property Name State 0	Well Number 23

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
E	12	17S	32E		1980	North	660	West	Lea

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	12	17S	32E		1980	North	660	West	Lea
Lee Code S	Producing Method Code P	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
015694	Navajo Refining Company	0706910	O	B-12-17S-32E

IV. Produced Water

POD	POD ULSTR Location and Description

V. Well Completion Data

Spud Date	Ready Date	TD	IBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: J.T. Jackson		OIL CONSERVATION DIVISION Approved by: [Signature] Title: [Signature] Approval Date: SEP 21 1994	
Printed name: J.T. Jackson Title: Partner Date: 9-15-94 Phone: (505)746-9680			
If this is a change of operator fill in the OGRID number and name of the previous operator #004309 Chaveroo Operating Co., Inc. c/o Oil & Gas Reporting Services, Inc., P.O. Box 755, Hobbs, N.M. 88241-0755			
Previous Operator Signature: [Signature] Printed Name: [Signature] Title: [Signature] Date: [Signature]			

District I
PO Box 1960, Hobbs, NM 88241-1960
District II
20 Drawer DD, Artesia, NM 88211-0719
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1000 Rio Brazos Rd., Aztec, NM 87410
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PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

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Revised February 10, 1994

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PO Box 2088
Santa Fe, NM 87504-2088

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Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Chaveroo Operating Company, Inc. c/o Oil Reports & Gas Services, Inc., P. O. Box 755, Hobbs, NM 88241		² OGRID Number 004309 ³ Reason for Filing Code CO
⁴ API Number 30 - 025-00525	⁴ Pool Name Maljamar GB-SA	⁴ Pool Code 43329
¹ Property Code 002558	¹ Property Name State O	¹ Well Number 23

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
E	12	17S	32E		1980	North	660	West	Lea

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	12	17S	32E		1980	North	660	West	Lea
¹² Lee Code S	¹² Producing Method Code P	¹² Gas Connection Date	¹² C-129 Permit Number	¹² C-129 Effective Date	¹² C-129 Expiration Date				

III. Oil and Gas Transporters

¹³ Transporter OGRID	¹³ Transporter Name and Address	¹³ POD	¹³ O/G	¹³ POD ULSTR Location and Description
015694	Navajo Refining Co. P. O. Box 159 Artesia, NM 88211-0159	0706910	O	B-12-17S-32E

IV. Produced Water

¹⁴ POD	¹⁴ POD ULSTR Location and Description

V. Well Completion Data

¹⁵ Spud Date	¹⁵ Ready Date	¹⁵ TD	¹⁵ PBDT	¹⁵ Perforations
¹⁶ Hole Size	¹⁶ Casing & Tubing Size	¹⁶ Depth Set	¹⁶ Sacks Cement	

VI. Well Test Data

¹⁷ Date New Oil	¹⁷ Gas Delivery Date	¹⁷ Test Date	¹⁷ Test Length	¹⁷ Tbg. Pressure	¹⁷ Cag. Pressure
¹⁸ Choke Size	¹⁸ Oil	¹⁸ Water	¹⁸ Gas	¹⁸ AOF	¹⁸ Test Method

" I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Laren Holler*

Printed name: Laren Holler

Title: Agent

Date: 5/18/94

Phone: (505) 393-2727

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY JERRY PEXTON
DISTRICT 1 SUPERVISOR

Title:

Approval Date: MAY 26 1994

" If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date

**New Mexico Oil Conservation Division
C-104 Instructions**

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "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
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)

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
9. The well number for this completion
10. 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.
11. The bottom hole location of this completion
12. Lease code from the following table:

F	Federal
S	State
P	Fee
J	Jicarilla
N	Navejo
U	Ute Mountain Ute
I	Other Indian Tribe
13. The producing method code from the following table:

F	Flowing
P	Pumping or other artificial lift
14. MO/DA/YR that this completion was first connected to a gas transporter
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
17. 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
20. 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.
21. Product code from the following table:

O	Oil
G	Gas

22. 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.)
 23. 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.
 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", etc.)
 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 shoe and TD if openhole
 30. Inside diameter of the well bore
 31. Outside diameter of the casing and tubing
 32. Depth of casing and tubing. If a casing liner show top and bottom.
 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.
34. MO/DA/YR that new oil was first produced
 35. 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
 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. 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.
 46. 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

RECEIVED

MAY 25 1994

**NEW MEXICO
OIL CONSERVATION
OFFICE**

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Chaveroo Operating Company, Inc.		Well API No.
Address c/o Oil Reports & Gas Services, Inc., P. O. Box 755, Hobbs, NM 88241		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	Eff. 4/1/89
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "0"	Well No. 23	Pool Name, Including Formation Maljamar GB SA	Kind of Lease State, Federal or Other	Lease No. B-871
Location Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line Section 12 Township 17S Range 32E , NM PM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> PERMIAN SCURLOCK PERMIAN CORP EFF 9-1-91	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, TX 77251-1183	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company 66 Natl Gas	Address (Give address to which approved copy of this form is to be sent) Bartlesville, OK 74004	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 12
	Twp. 17S	Rge. 32E
	Is gas actually connected? Yes	When? 9/27/60

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Donna Holler Agent
Printed Name Donna Holler Title
Date 4/6/89 Telephone No. 505-393-2727

OIL CONSERVATION DIVISION

Date Approved APR 7 1989

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.