

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
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised October 18, 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 SAGA PETROLEUM Limited Liability Co of Colorado 415 W. WALL, SUITE 835 MIDLAND, TX 79701		OGRID Number 148967
API Number 30 - 025 - 00532	Pool Name MALJAMAR GRAYBURG SAN ANDRES	Pool Code 43329
Property Code 20306	Property Name MALMAR UNIT	Well Number 206
Reason for Filing Code CH, EFFECTIVE 1-1-97		

II. Surface Location

UL or lot no. F	Section 13	Township 17S	Range 32E	Lot Idn	Feet from the 1980	North/South Line NORTH	Feet from the 1980	East/West line WEST	County LEA
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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
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
034019	PHILLIPS 66 CO. P.O. BOX 5400 BARTLESVILLE, OK 74005	2064510	O	

IV. Produced Water

POD 264550	POD ULSTR Location and Description
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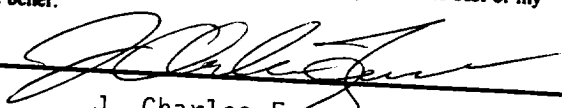
V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations	DHC, DC, MC
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement		

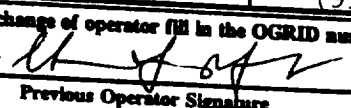
VI. Well Test Data

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. Charles Farmer
Title: Manager
Date: 2/14/97
Phone: (915) 684-4293

OIL CONSERVATION DIVISION
Approved by: ORIGINAL SIGNED BY
GAP/VAK
Title: FIELD MGR II
Approval Date: MAR 07 1997

If this is a change of operator fill in the OGRID number and name of the previous operator
Previous Operator Signature: 
Printed Name: M. Y. MERCHANT, PRESIDENT
Title: President
Date: 2/17/97
OGRID: 017213
Company: PENROC OIL CORPORATION

District I
PO Box 1988, Hobbs, NM 88241-1988

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 <i>Lynroc Oil Corporation</i> <i>P.O. Box 5970</i> <i>Hobbs, N.M. 88240-5970</i>		OGRID Number <i>017213</i>
		Reason for Filing Code <i>CO</i>
API Number <i>30-025-00532</i>	Pool Name <i>Mulman, Dayburg San Andres</i>	Pool Code <i>43329</i>
Property Code <i>008906</i>	Property Name <i>Mulman Unit #2</i>	Well Number <i>6</i>

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West line	County
<i>F</i>	<i>13</i>	<i>17S</i>	<i>32E</i>		<i>1980</i>	<i>North</i>	<i>1980</i>	<i>West</i>	<i>Lea</i>

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
¹² Les Code	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
<i>017613</i>	<i>Phillips Pet. Co. - Truckee</i> <i>4001 Fernbrook</i> <i>Odessa, TX 79762</i>	<i>2064510</i>	<i>O</i>	<i>B 13-17S-32E Lea</i> <i>County</i>
		<i>2064530</i>	<i>E</i>	

IV. Produced Water

¹⁸ POD <i>2064550</i>	¹⁹ POD ULSTR Location and Description
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V. Well Completion Data

²⁰ Spud Date	²¹ Ready Date	²² TD	²³ PBTD	²⁴ Perforations
²⁵ Hole Size	²⁶ Casing & Tubing Size	²⁷ Depth Set	²⁸ Sacks Cement	

VI. Well Test Data

²⁹ Date New Oil	³⁰ Gas Delivery Date	³¹ Test Date	³² Test Length	³³ Tbg. Pressure	³⁴ Csg. Pressure
³⁵ Choke Size	³⁶ ...	³⁷ ...	³⁸ Gas	³⁹ AUP	⁴⁰ 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:

Title:

Date:

Phone:

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title:

Approval Date:

JUL 07 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

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 <i>Pemroc Oil Corporation</i>	Well API No.
Address <i>P.O. Box 5970 Hobbs, NM 88241</i>	
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"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Effective <i>10.13.90</i>
If change of operator give name and address of previous operator <i>Southland Royalty Co. 21 Dextra Dr. Midland TX 79701</i>	

II. DESCRIPTION OF WELL AND LEASE

Lease Name <i>Mallmar Unit Tr.2</i>	Well No. <i>6</i>	Pool Name, including Formation <i>Maljamar (G-SA)</i>	Kind of Lease <input checked="" type="checkbox"/> State, <input type="checkbox"/> Federal or Fee	Lease No. <i>B. 2229</i>
Location Unit Letter <i>F</i> : <i>1980</i> Feet From The <i>North</i> Line and <i>1980</i> Feet From The <i>West</i> Line Section <i>13</i> Township <i>17 S</i> Range <i>32 E</i> , NMPM, <i>Lea</i> 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"/> <i>Texas New Mexico Pipeline</i>	Address (Give address to which approved copy of this form is to be sent) <i>P.O. Box 2528 Hobbs, NM 88240</i>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <i>Phillips Petroleum Co. 66 Nat'l gas</i>	Address (Give address to which approved copy of this form is to be sent) <i>4001 Pembroke Odessa TX 79762</i>	
If well produces oil or liquids, give location of tanks.	Unit <i>C</i>	Sec. <i>13</i>
	Twp. <i>17 S</i>	Rge. <i>32 E</i>
	Is gas actually connected? <i>yes</i>	When? <i>N/A</i>

If this production is commingling 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]

Printed Name
MOHAMMED YAMIN MERCHANT

Title
President

Date
Oct. 16, 1990

Telephone No.
(505) 397-3596

OIL CONSERVATION DIVISION

Date Approved *OCT 17 1990*

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.