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

State of New Mexico

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

District II 10 Drawer DD, Artesia, NM \$2211-0719

PO Bo						TION DIVISION Submit to Appropriate District O					ropriate District Office 5 Copies		
District IV PO Box 2008, S	anta Fe, NM	E 87504-2088			Fe, NM						AMENDED REPORT		
I.	R	EQUES'	FOR A	LLOWA	BLE A	ND AU	THORIZ	TAS	ON TO TE				
Marks a	nd Gar	ner Pro	duction,	LTD. Co	٠.						¹ OGRID Number		
c/o 0i1	Repor	ts & Ga	s Servic	es, Inc.	• •	The edit Im				014070 Reason for Filing Code			
P. O. Box 755 Hobbs, New Mexico 88241							to operator				name. Requested Ogrid #		
						Pool Name				same. Eff. 12/01/94			
30 - 0 25-	02703		Townsend Permo Uppo							' Pool Code			
						roperty Na			· · · · · · · · · · · · · · · · · · ·	59847			
	6573			W.M.	r			001					
II. 10 S		Location				,							
Ul or lot no.	Section	Township	Range	Lot.ida	Feet from	n the	North/South	Line	Feet from the	East/West	line County		
G	35	15S	35E		1,8	80	NORTH	1	1980	EAST	LEA		
		Hole Lo	cation	<i>i</i>						 			
UL or lot no.			Range	Lot Ida	Feet fro	4	North/South line		Feet from the	East/West	line County		
G 12 Lee Code	35	15S	35E		19		NORTH		1980	EAST	LEA		
P	• • • • • • • • • • • • • • • • • • • •		1/31/61		ate "C	:-129 Perm	i Number 1		* C-129 Effective Date 17 C-129 Expiration De		17 C-129 Expiration Date		
III. Oil au							<u></u>			<u></u>			
" Transporter OGRID		11	¹⁷ Transporter Name and Address			" POD " O/G		0/G	22 POD ULSTR Location and Description				
- 000770		moco Pl ITD 02 N.W. Ave.				1273410 0		0	G-35-15S-35E				
Leve			w. Ave. and, Tx 79702						333 332				
1 UZ4NOU I			Pet. Corp.			1273430 G			G-35-15S-35E				
Edition	ılsa, OF	, ОК 74102											
CON SOME OWNERS.		·					_						
				2000									
estagnicana (n. 1888).					200								
IV. Prodi	iced Wa	ter			****								
	POD					" POD UL	STR Location	and D	escription .				
V Well (omnlet.	ion Data											
V. Well Completion Data "Spud Date "Ready Date						"TD "PBTD			# PRTT)	¹⁹ Perforations			
M Hole Size			H Casing & Tubing Size			u Depth Set			n n		Sacks Cement		
							··						
								·					
VI. Well				·									
M Date New Oil		" Gas D	M Gas Delivery Date		3 Test Date		" Test Length		³⁰ Tbg. Pressure		³¹ Cag. Pressure		
" Choke Size		44	4 Oil		4 Water		⁴ Gas		" AOF		4 Test Method		
" I hereby certif	y that the rul	es of the Oil	Conservation Di	ivision have be	en complied	<u> </u>							
with and that the information given above is true and complete to the best of my knowledge and belief.						OIL CONSERVATION DIVISION							
Signature: Jack Holler						Approved by: CRECECT SECTION							
Laren Holler							Title:						
Agent Date: 12/14/94						Approval Date:							
" If this is a ch		rator (ill la ti	o OGRID)5) 393-;	2727	L							
				went	me bies	abstri	⊎ F						
	Previous O	perator Signs	rture			Printed	Name			Title	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 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.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recomplistion

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) requested If for any other reason write that reason in this box.

- The API number of this well
- 5. The name of the pool for this completion
- 6. The pool code for this pool
- The property code for this completion
- 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.
- 11. The bottom hole location of this completion
- Lease code from the following table: 12.

Federal State Fee

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 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 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.
- Product code from the following table:
 O Oil
 G Gas 21.

- 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 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: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26.
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- 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.
- 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
- 35. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 36.
- 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.
- Diameter of the choke used in the test 40.
- Barrels of oil produced during the test 41.
- 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
- The method used to test the well:

Flowing Pumping Swabbin

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.



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