District I

PO Box 1980, Hobbs, NM 88241-1980

District II

811 South First, Artesia, NM 88210

District III

State of New Mexico Energy, Minerals & Natural Resources Dep

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION 2040 South Pacheco

00 Rio Brazos	Rd., Aztec, N	VM 87410		Santa	Fe, NM	875	05						
istrict IV			-		· - · - · - · - · - · - · - · - · - · -					لبا	AME	NDED REPORT	
40 South Pach	eco, Santa Fe RF	ENTEST F	OR AT	LOWARI	EAND	ATIT	HORI7	'ATTO	ON TO TRA	ANSPO	RT		
<u></u> _		1 O	perator nam	e and Address	<u> </u>	1101	HOIGE	Ť		² OGRID	Number		
RICE OPERATING COMPANÝ 122 WEST TAYLOR							01917				Reason for Filing Code		
HOBBS, NM 88240							СО				8-1-98		
API Number Poo							l Name				Pool Code		
30 - 0 25-05369 SWD,									 	096091			
009602	perty Code		* Property Na ABO SWD				Name)			' Well Number 31			
	Surface I	ocation	· -										
Ul or lot no.	Section	Township 16S	Range 37E	Lot.Idn	Feet from the	ne North/South Line		th Line	Feet from the 2626	East/West line W		County 25	
F	31 ·	16S	37E		2310		l ^N		2020				
	Pottom E	Hole Locat	ion								_		
UL or lot no.	Section 1	Township	Range	Lot Idn	Feet from th	he North/South		nth line	Feet from the	East/West line		County	
			,							<u> </u>			
¹² Lse Code S		ng Method Code	14 Gas (Connection Date	ь ^и С-12	9 Permi	t Number	1	C-129 Effective	Date	17 C-1	29 Expiration Date	
	SWI		.1					<u>. I</u>					
II. Oil and Gas Transporters								21 O/G	²² POD ULSTR Location				
18 Transporter OGRID			19 Transporter Name and Address			24 POD 21		U/G	and Description				
			OPERATING			2809370 O		0					
	2000025500000	90 вох 30											
	******	HOBBS, NM			24.395								
012426		MACLASKEY		ELD SERV.	. INC	2809	370	0					
	202200000000000000000000000000000000000	PO BOX 58		1									
							370	<u> </u>					
130908 PATE TRUCKING COMPANY PO BOX 1008								0					
	I	HOBBS, NM	8824	1	###								
	**												
							(8.7115. XXX.42		<u> </u>				
	uced Wa	ater			24	POD III	STP Local	tion and	Description				
_	POD	Ì	-	-		TOD O	LO IN LOCA		Datipuon				
									·				
V. Well Completion Dat			Ready Date "T			" РВТО			25 Perforations		1	3º DHC, DC,MC	
Spud Date		"	Ready Date			1818					<u> </u>		
31 Hole Size			³² Casing & Tubing Size			33 Depth			Set		34 Sacks Cement		
			1				 						
									<u> </u>				
VI. Wel	l Test D	ata											
				est Date	Date St Length			39 Tbg. Pressu		1	4 Csg. Pressure		
41 Choke Size			⁴² Oil ⁴³ Wate			" Gas			45 AOF		+-	" Test Method	
" Che	oke Size		Oil		water				`				
47 I hereby ce	rtify that the r	rules of the Oil C	onservation l	Division have bee	en complied						D 77 77	CION	
with and that knowledge ar		on given above is	true and con	pelete to the best	t of my		C)IL C	ONSERVA	TION	DIAE	SION	
Signature:							Approved by: ORIGINAL SIGNED BY CHRIS WILLIAMS						
Printed name:							Title: DISTRICT I SUPERVISOR						
Ken Hasten													
Tide: General Manager						Approval Date: AUG 1 6 1996							
Date:			Phone:	(505) <u>39</u> 3	3-9174	<u> </u>					====		
4 If this is	a change of o	perator fill in th	ne OGRID n	umber and nam	ne of the previ	ious ope	rator						
 		- Oto- Sion				D. 1	inted 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

SEAS OF ORDER

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 effective date.)

 AO Add oil/condensate transporter

 CO Change oil/condensate transporter

 AG Add gas transporter

 CG Change gas transporter

 RT Pagus for the following table: 3. Change gas transporter
 Request for test allowable (Include volume requested) ŘŤ 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
- 12 Lease code from the following table:
 - Federal State S Fee
 - Jicarilla
 - NU
 - Navajo Ute Mountain Ute
 - Other Indian Tribe
- The producing method code from the following table:

 F Flowing
 P Pumping or other artificial lift 13.
- 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
- MO/DA/YR of the expiration of C-129 approval for this 17. 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.
- Product code from the following table:
 O Oil 21. Ğ
- 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.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 26.
- 27. Total vertical depth of the well
- 28. Plugback vertical depth

- Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and bottom.
- 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 t. 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.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 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
- Gas well calculated absolute open flow in MCF/D 45.
- 46. The method used to test the well: Flowing Pumping Swabbing 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 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.