District I				State of New Mexico					<u>_</u>			Form C-10		
PO Ees 1998, Elablas, NM 88241-1998 District []						Natural Rason			Revised February 10, 199 Instructions on bac					
PO Drawer DD, Artenin, NM 88211-0719 District III 1999 Rie Brams Rd., Aster, NM 87410				OIL CONSERVATION DIVISION PO Box 2088					Submit to Appropriate District Offic 5 Copie					
District IV				Santa Fe, NM 87504-2088							AMI	ENDED REPORT		
PO Box 2008, I.				LLOWA	BLE	AND AU	лтноі	RIZAT	ION TO TI	RANSP				
				ame and Addre					¹ OGRID Number					
			ing Comp						153281					
4925 Greenville Avenue, S Dallas, Texas 75206				Suite 1220					³ Research for Filing Code					
				¹ Poel Name					CH eff. 1/1/99					
*AFI Number 30 - 0 25–24895 Shoe			Shoe B	Bar; Wolfcamp, North					56295					
' Property Code				' Property Name					' Well Number					
				nto State forma					1			1		
II. ¹⁰ . Ul er lat me.	Surface	Location	Range	Lot.ldn		t from the	North /R	eath Line	Feet from the	1 E				
K	14	165	35E	1.48.100		1980		uth	1980	Eest/Wes		Coenty Lea		
11	Bottom	Hole Lo	cation	<u>I</u>					1900	west				
UL or int no.		Township		Lat Ida	Fee	t from the	North/S	iouth line	Fest from the	East/Wes	i las	Ceenty		
К	14	165	35E			1980	So	uth	1980	West		Lea		
" Lee Code S	"note Sh	ing Marked (iede [™] Gas r∕	Connection De	**	¹⁴ C-129 Perm	it Number	' ' '	C-129 Effective I	Date	" C-1	29 Expiration Date		
III. Oil a		A.,												
" Treaspo OGRID			" Transporter i and Advira			* 10	D	¹⁴ O/G		POD ULS and Des				
034019 4001 Pembro			brogk	rook			0783410 0		K 14 16S 35E					
		dessa\	TX 7976	/62										
024650 Warren Petrole P. Ø. Box 1589 Pulsa. OK 741			x 1589		078343	430 G		K 14 16S 35E						
			<u>K (410</u> 2											
	· · · · · · · · · · · · · · · · · · ·			,										
V. Produ		ater												
	POD					" POD UI	⁴ POD ULSTR Location and Description							
078345 V. Well (LK 1	<u>4 165 35</u>	<u>E</u>										
	ed Date		" Ready Di	nte		" TD	T				77	Perforations		
" Hole Size		¹¹ Casing & Tubing Size			" Depth Set				1	²⁰ Sacks Cement				
	·		·							·				
<u> </u>				·····-						······	. <u> </u>			
														
VI. Well	Test Da	ita	1			l				<u> </u>				
			" Gas Dalivery Date		³⁰ Test Date		" Test Length		" Tbg. Pressure		¹⁴ Cag. Pressure			
- Choke	e 51 a	•	' O9		1	<u>-</u>	4 G95		" A01	F		* Test Merrir		
				ivision have bee		slied								
with and that the information given above is true and complete to the best of my norwindge and belief.							OIL CONSERVATION DIVISION							
Printed same:		1 PART //	Durde		Title:									
Arthur N. Budge, Sr.							Approval Date:							
Date:	Operations Manager On Dome: 1/24 1/24 Phome: 214-363-3008 0													
	bange of ope	rotor fill in t	he OGRID au	aber and name	_	previous opera	lor	i na s ala						
		MI	que	9		Mark I		dler	Pres	ident		1/27/99		

Previous Operator Signature 014096 Mark L. Shidler, Inc.

Printed Name

Title

Date

IF THE	S IS AN AMENDED REFORT, CHECK THE BOX LABLED IDED REPORT AT THE TOP OF THIS DOCUMENT	22.	The ULSTR location of this POD if it is different from the well completion location and a short description of the POD				
	all gas volumes at 15.025 PSIA at 60°.		(Example: "Battery A", "Jones GPD", etc.)				
Report	all oil volumes to the nearest whole barrel.	23.	The POD number of the storage from which water a noved				
accom	est for allowable for a newly drilled or deepened well must be panied by a tabulation of the deviation tests conducted in ance with Rule 111,		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.				
new ar	tions of this form must be filled out for allowable requests on Id recompleted wells.	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.)				
change	only sections I, II, III, IV, and the operator certifications for of operator, property name, well number, transporter, or uch changes.	25.	MO/DA/YR drilling commenced				
	-	26.	MO/DA/YR this completion was ready to produce				
comple	arate C-104 must be filed for each pool in a multiple tion.	27.	Total vertical depth of the well				
Imprope	arly filled out or incomplete forms may be returned to	28.	Plugback vertical depth				
operato	rs unapproved.	29.	-				
1.	Operator's name and address	43 .	Top and bottom perforation in this completion or casing shoe and TD if openhole				
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.	Inside diameter of the well bore				
3.	Reason for filing code from the following table:	31.	Outside diameter of the casing and tubing				
	NW New Well RC Recompletion	32.	Depth of casing and tubing. If a casing liner show top and bottom.				
	CH Change of Operator AO Add oil/condensate transporter						
•	CO Change oil/condensate transporter	33.	Number of sacks of cement used per casing string				
	AG Add gas transporter CG Change gas transporter RT Request for test allowable (Include volume	The foi conduc	Nowing test data is for an oil well it must be from a test . Ited only after the total volume of load oil is recovered.				
	requested) If for any other reason write that reason in this box.	34.	MO/DA/YR that new oil was first produced				
4.		35.	MO/DA/YR that gas was first produced into a pipeline				
5 .	The API number of this well	36.	MO/DA/YR that the following test was completed				
	The name of the pool for this completion	37.	Length in hours of the test				
6.	The pool code for this pool	38.	Flowing tubing pressure - oil wells				
7.	The property code for this completion		Shut-in tubing pressure - gas wells				
8. 9.	The property name (well name) for this completion The well number for this completion	39.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells				
10.		40.	Diamater of the choke used in the test				
10.	The surface location of this completion NOTE: If the United States government survey designates a Lot Number	41.	Barrels of oil produced during the test				
	for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.	42.	Barrele of water produced during the test				
11.	The bottom hole location of this completion	43.	MCF of gas produced during the test				
12.	Lease code from the following table:	44.	Gas well calculated absolute open flow in MCF/D				
	F Federal S State	45.	The method used to test the well:				
	P Fee J Jicarilla		F Flowing				
	N Navajo		P Pumping S Swabbing				
	U Ute Mountain Ute I Other Indian Tribe		If other method please write it in.				
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift	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				
14.	MO/DA/YR that this completion was first connected to a gas transporter	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 dest the previous				
15	gas transporter The permit number from the District approved C-129 for						

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- 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 completion 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**.

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eigned by that person

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