District I PO Box 1960, Hubba, NM 88241-1960 District II PO Drawer DD, Artenia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztoc, NM 87416 District IV PO Box 2083, Santa Fe, NM 87504-2088						State of New Mexico Libergy, 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																
Samso	on Re	esou	irces C	-		name and Address						¹ OGRID Number 020165				
Samsc	1	-	-							* Reason for Filing Code						
Two West Second Street Tulsa, OK 74103-3103												CH-Effective June 1, 1996				
⁴ All Number 30 - 0 25-25053						* Pool Name						" Pool Code				
Property Code						Casey Strawn 'Property Name						10310 ' Well Number				
002921 19070						Shipp 34A						1				
II. ¹⁰ Surface Location																
Ul or lot no.			Township		Range			et from the		North/South Line		1000		West line County		
C			16S Iole Loca		37E		660		<u></u>	Nor		1980	W	West Le		
UL or lot no.					Range Lot Idn		Feet from		the	North/South line		Feet from the	East/V	East/West line County		
¹² Lae Code ¹³ Pr		oducing Method (P		Code " Gas C 9/3/7		Connection Date		" C-	129 Permi	it Number		C-129 Effective	Date	e ¹⁷ C-129 Expiration		
III. Oil a	nd G	_		rler												
Transpor	Transporter			" Tran			nsporter Name			D	" 0/G	^u PC		OD ULSTR Location		
OGRID		EOTT Energy O			od Addres				0757010		0		and	Description	a	
007440		Р	O Box 4	466	6						Jan Jan Karaka (Karaka (
System and the second second second			uston, L Davis		. //21	210-4666			0757030 G				·			
011447		21	1 N. Co	olo							6					
		Mi	dalnd,	TX	7970	1-4696										
IV Declared Weter																
п	IV. Produced Water ¹⁰ POD ¹⁰ POD ULSTR Location and Description 0757050															
V. Well			ion Dat													
^u Sp	t		²⁴ Ready Date					" TD			" PBTD		³¹ Perforations			
* Hole		: Size		" Casing & Tu			ing Size	e	³³ Depth S		Depth Se	et 🔰		³⁰ Sacks Cement		
					·						····					
VI. Well	Test	Da	to													
Date N		Data ³⁶ Gas Delivery Da			e ³⁴ Test Date			³⁷ Test Length		ngth	³⁴ Tbg. Pressure			" Cag. Pressure		
											-				•	
4 Cbok			4 OU			" Water		4 ¹ Gas		\$	" AOF			⁴⁴ Test Method		
" I hereby cert	ufy that	the ru	les of the Oi	I Con	servation D	livision have h	een com	uplied	<u></u>			1				
with and that the knowledge and	he infor	mation	given above	is tr	ue and com	plete to the be	st of m	y		0	IL CO	NSERVAT	TION 1	DIVIS	ION	
Signature:		A.n.	d k)	1				Approve	ed by: O	RIGINA	L SIGNED BY	32.55Y	GEXTO	N	
Printed name:	Trant	eed.	L				<u> </u>	D!	10712X7/208							
Tille: PR	UN F	Inst	Ŧ				d Date:		JUN 2 0 1996							
Date: 5	129	196	,		Polone: 9	8.583										
" If this is a 0 0257		of ope				mber and nar y, Inc.		e prev	lous opers	lor						
1/16	·	ioyn C	Operator Sig				•		Print	ed Name	· ····		1	īlde	Date	
Klyth	lux	10	lotif)			Phy]	llis	Sobo	<u>tik</u>	S	up.,Prod/	Reg A	ffair	s 5-31-416	
IJ																

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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.

- Operator's name and address 1.
- 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 3.

 - 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.
- The API number of this well 4.
- The name of the pool for this completion Б.
- The pool code for this pool 8.
- The property code for this completion 7.
- The property name (well name) for this completion 8.
- The well number for this completion 9.
- 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.
- The bottom hole location of this completion 11.
- Lease code from the following table: 12.
 - Federal State
 - Fee Jicarilla

SP

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- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: F Flowing P Pumping or other artificial lift 13.
- MO/DA/YR that this completion was first connected to a 14 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. completion
- The gas or oil transporter's OGRID number 18.
- 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: 21.

0 G Oil Gas

- 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.
- Total vertical depth of the well 27
- 28. **Plugback vertical depth**
- Top and bottom parforation in this completion or casing shoe and TD if openhole 29.
- Inside diameter of the well bo 30.
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and bottom. 32
- Number of sacks of cement used per casing string 33.

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 34.
- MO/DA/YR that gas was first produced into a pipeline 35.
- MO/DA/YR that the following test was completed 36.
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells
- Diameter of the choke used in the test 40
- 41. Barrels of oil produced during the test
- Barrels of water produced during the test 42.
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well: 45.
- F Flowing P Pumping S Swabbing If other method please write it in.
- The signature, printed name, and title of the person authorized to make this report, the data 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.