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

State of New Mexico

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

Submit to Appropriate District Office

District II

70 Drawer DD, Artesla, NM 88211-0719 OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088 5 Copies District III 1000 Rio Brazos Rd., Aztec, NM 87410 AMENDED REPORT PO Box 2088, Santa Fe, NM 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OGRID Number Operator name and Address 817 200806 Anadarko Petroleum Corporation 1 Reason for Filing Code PO Box 130 Artesia, NM 88210-0130 CG 1 Pool Code Pool Name ⁴ API Number S. Kemnitz Atoka Morrow Gas 79420 30 - 0 25 - 27513 ' Well Number Property Name ¹ Property Code State 19 001386 II. 10 Surface Location Lot.ldn Feet from the North/South Line | Feet from the East/West line County Ul or lot no. Section Township Range 960 South 2130 East Lea 19 16S 34E N/A 11 Bottom Hole Location East/West line County Feet from the North/South line Feet from the Lot Ida UL or lot no. Section Township Range South 2130 East Lea 960 34E N/A 19 16S " C-129 Effective Date " C-129 Expiration Date 14 Gas Connection Date 16 C-129 Permit Number 11 Lac Code 13 Producing Method Code 02-01-95 N/A N/A N/A S III. Oil and Gas Transporters " POD 11 O/G 2 POD ULSIR Location " Transporter Name 38 548 Transporter and Description and Address OCRID Amoco Pipeline ITD 0458110 0 000734 502 N West Ave Levelland TX 79336-3914 Same 0458130 G GPM Gas Corporation 009171 10 W.W. Frank Phillips BLDG Same Bartlesville OK 74004 V. Produced Water ¹⁴ POD ULSTR Location and Description TOP E Same as above Do not have Well Completion Data " 1D " PBTD " Perforations B Spud Date 34 Ready Date 33 Sacks Cement 33 Depth Set " Hole Size 31 Casing & Tubing Size Well Test Data " Cag. Pressure Date New Oil M Gas Delivery Date " Test Length M Thg. Pressure M Test Date " Gas 4 Oil 4 Water 4 AOF " Test Method " Choke Size "I hereby certify that the rules of the Oil Conservation Division have been complied OIL CONSERVATION DIVISION with and that the information given above is true and complete to the best of my knowledge and belief. Approved BRIGINAL SIGNED BY JERRY SEXTON Signature: DISTRICT I SUPERVISOR Printed name: Mike Braswell Title: Approval Date: Field Foreman MAR 0.9 1995 Phone: 505) 677-2411 Date: 03-06-95 " If this is a change of operator fill in the OGRID number and name of the previous operator

Printed Name

Previous Operator Signature

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 80° Report all oil volumes to the nearest whole bai

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
- 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

 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. 3.

- 4 The API number of this well
- 5 The name of the pool for this completion
- 6. The poct code for this pool
- 7. The property code for this completion
- 8 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
- 12. Lease code from the following table:

SP

13.

Federal State Fee Jicarilla

Navajo Ute Mountain Ute Other Indian Tribe

- The producing method code from the following table:

 F Flowing
 P Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a gas transporter 14
- 15. The permit number from the District approved C-129 for this completion
- 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.
- 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.
- 21. Product code from the following table: Gae

- 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 28.
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhols 29.
- 30. Inside diameter of the well have
- 31 Outside diameter of the casing and tubing
- 32. Depth of casing and tubing. If a casing liner show top and bottom.
- 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.
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 37 Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil walls Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- 41. Barrels of oil produced during the test
- 42. Barrels of water produced during the test
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- 45. 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 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.

