District I
1625 N French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised March 25, 1999

Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

[1] Operator name and Address	[5] OGRID Number
MESQUITE SWD INC. P. O. BOX 481 CARLSBAD, NEW MEXICO 88220	161968
	[6] Reason for Filing Code CH EFFECTIVE 08/01/00

[4] API Number	[3] Pool Name	[7] Pool Code
30 - 025-27950	SWD; SAN ANDRES	96121
[8] Property Code 27312	[9] Property Name VULTURE VP STATE SWD	[10] Well Number 1

II. [10] Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
D	14	15S	33E -		330	NORTH	330	WEST	LEA

[11] Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

[12] Lse Code	[13] Producing Method Code	[14] Gas Connection Date	[15] C-129 Permit Number	[16] C-129 Effective Date	[17] C-129 Expiration Date
S					

III. Oil and Gas Transporters

[18] Transporter OGRID	[19] Transporter Name and Address	[20] POD	[21] O/G	[22] POD ULSTR Location and Description
		2809164	O	D

IV. Produced Water

[23] POD	[24] POD ULSTR Location and Description
~~2809164~~	~~D-014-15S-33E, VULTURE VP STATE SWD~~

V. Well Completion Data

[25] Spud Date	[26] Ready Date	[27] TD	[28] PBTD	[29] Perforations	[30] DHC, MC

[31] Hole Size	[32] Casing & Tubing Size	[33] Depth Set	[34] Sacks Cement

VI. Well Test Data

[35] Date New Oil	[36] Gas Delivery Date	[37] Test Date	[38] Test Length	[39] Tbg. Pressure	[40] Csg. Pressure

[41] Choke Size	[42] Oil	[43] Water	[44] Gas	[45] AOF	[46] Test Method

[47] I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: Clay Wilson
Printed name: CLAY L. WILSON
Title: PRESIDENT
Date: AUGUST 8, 2000 Phone: (505) 885-3996

OIL CONSERVATION DIVISION

Approved by:
Title:
Approval Date: FEB 07 2001

[48] If this is a change of operator fill in the OGRID number and name of the previous operator

014007 MARALO, LLC — Joe C. Pulido — JOE C. PULIDO — MANAGER — AUGUST 8, 2000

Previous Operator Signature — Printed Name — Title — Date

New Mexico Oil Conservation Division
C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "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

2. Operator's OGRID number. If you do not have one, it will be assigned and filled in by the District office.

3. 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.

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.

9. The well number for this completion.

10. 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.

11. The bottom hole location of this completion.

12. Lease code from the following table:
    - F Federal
    - S State
    - P Fee
    - J Jicarilla
    - N Navajo
    - U Ute Mountain Ute
    - I Other Indian Tribe

13. The producing method code from the following table:
    - F Flowing
    - P Pumping or other artificial lift

14. MM/DD/YY that this completion was first connected to a gas transporter.

15. The permit number from the District approved C-129 for this completion.

16. MM/DD/YY of the C-129 approval for this completion.

17. MM/DD/YY of the expiration of C-129 approval for this completion.

18. The gas or oil transporter's OGRID number.

19. Name and address of the transporter of the product.

20. 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.

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

22. 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.)

23. 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.

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.).

25. MO/DA/YR drilling commenced.

26. MO/DA/YR this completion was ready to produce.

27. Total vertical depth of the well.

28. Plugback vertical depth.

29. Top and bottom perforation in this completion or casing shoe and TD if openhole.

30. Write in 'DHC' if this completion is downhold commingled with another completion or 'MC' if there is more than one non-commingled completion in this well bore. Attach actual completed well bore diagram

31. Outside diameter of the casing and tubing.

32. Depth of casing and tubing. If a casing liner, show top and bottom.

33. 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.

34. MM/DD/YY that new oil was first produced.

35. MM/DD/YY that gas was first produced into a pipeline.

36. MM/DD/YY that the following test was completed.

37. Length in hours of the test.

38. Flowing tubing pressure - oil wells
    Shut-in tubing pressure - gas wells

39. Flowing casing pressure - oil wells
    Shut-in casing pressure - gas wells

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.

44. Gas well calculated absolute open flow in MCF/D.

45. The method used to test the well:
    - F Flowing
    - P Pumping
    - S Swabbing

    If other method please write it in.

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.

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.