District 4 PO Box 1988. Hobbs. NM 88241-1988 District II

State of New Mexico

Form C-104 Revised February 10. 1994 Instructions on back Submit to Appropriate District Office

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OIL CONSERVATION DIVISION

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Steven A. Taylor

Rngineer

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 bar

A request for allowable for a newly drilled or descened well must be accompanied by a tabulation of the deviation tests conducted in accordance with fulls 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 chang

A separate C-104 must be filed for each pool in a multiple completion.

improperty 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 tilled in by the District office. 2.
- Reason for filing code from the following table:

 NW New Well

 RC Recombission

 CH Change of Operator

AO CO AG CG

RT

If for any other reason write that reason in this box.

- 4. The API number of this well
- The name of the pool for this completion 5.
- The pool code for this pool 6.
- 7. The preperty code for this completion
- 6. The property name (well name) for this completion
- 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 OCO unit letter. 10.
- The bottom hole location of this completion 11.
- Lease code from the following table: F Federal S State 12.

Fee Jicardia

Nevero

Ute Mountain Ute Other Indian Tribe

The producing method code from the following table: 13.

Flowing Pumping or other artificial lift

- MO/DA/VR that this completion was first connected to a 14.
- The permit number from the District approved C-129 for this completion 15.
- MO/DANK of the C-129 approval for this completion 16.
- MO/DANR of the expiration of C-129 approval 17.
- The gas or oil transporter's OGRID number 16.
- 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 recombistion and this POD has no number the district office will assign a number and write it here. 20.
- reduct eads from the following table: Off Geo 21.

- The ULSTR location of this POD if it is different from the well completion location and a short description of the PO (Example: "Battery A", "Jones CPD", etc.) 22.
- The POD number of the storage from which water is move from this property. If this is a new well or recompletion an this POD has no number the district office will assign number and write it here. 23.
- The ULSTR location of this POD If it is different from the west completion location and a snort description of the PC (Example: "Battery A Water Tank", "Jones CPD Water Tank" 24. Tank .etc.)
- MO/DAYR drilling commenced
- MO/DA/YR this completion was ready to produce 26.
- Total vertical depth of the well 27.
- Plugback vertical depth 28.
- Top and bottom perforation in this completion or case shoe and TD if opennois 29.
- Inside diameter of the well bore 30.
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top a 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 to conducted only after the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipelin 35.
- MO/DA/YR that the following test was completed 38
- Length in hours of the test 37.
- Flowing tubing pressure oil well Shut-in tubing pressure gas well
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- Diameter of the choke used in the test 40.
- Barrels of oil produced during the test 41.
- Barrels of water produced during the test 42.
- MCF of gas produced during the test 43.
- Gas well calculated absolute open flow in MCF/D 44.

The method used to test the well: 45

F Flowing
P Pumping
S Swapbing
If other method please write it in.

- The signature, printed name, and title of the per authorized to make this report, the date this report signed, and the telephone number to call for quest about this report 46.
- The previous operator's name, the signature, printed na and title of the previous operator's represents authorized to verify that the previous operator ne for operator this completion, and the date this repositioned by that person 47.

