District i i O Box 1980, Holobs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Departm

Form C-104 Revised February 10, 1994 Submit to Appropriate District Office

District II NO Drawer DD, Artenia, NM 88211-0719

OIL CONSERVATION DIVISION

Instructions on back

dip

District III	. Dal Amer	ND 4 65414			PO Box			7 .\			5	5 Copies	
1000 Rie Brame District IV	Man, Alber,	MM 8/418		Santa Fe, NM 87504-2088					X AMENDED REPORT				
PO Box 2008, & [_	•		Γ FOR A	LLOWAE	RIFANI) AII'	THORI	7 A TT	אר די אי				
I. REQUEST FOR ALLOWABLE AN Operator name and Address							7 AUTHORIZATION TO 1				OGRID Number		
Chesapeake Operating, Inc.									147179				
P. O. Box 18496 THIS WELL HAS BEEN PLACED Oklahoma City, ORESIGNATED BUT WOLF YOU DO							POOL			'Reason for Filing Code			
	Per hi i			HS OFFICE					<u>NW</u>				
*API Number 1 & Sharbo 30-025-33623 Wildcat					Strawn 10776				7 Pool Code 96649				
, Pr	operty Code			' Property Name							'Well Number		
19606			Chamb	Chambers 7						1	1.		
		Location											
Ul or ict mo.	H 7 165						North/Sou		Feet from the	East/West		aty	
		<u> </u>			Nort	h	900 East LEA						
UL or lot no.		Hole Lo		Lot Ida	Feet from	the I	North/Soi	ush Kina	Feet from the	East/West	line Cou		
77	7	165	l		165				9万3	5	Lec	· d	
12 Lee Code	13 Produc	ing Method C		Connection De			i Number	1 "	C-129 Effective	Date	" C-129 Expirati	ion Date	
P		K_	11/	196									
III. Oil a													
" Transporter OGRID			17 Transporter Name and Address			" POD " O/				¹² POD ULSTR Location and Description			
		Amoco Pipeline IC			251		υ.	Sec 7, 16S-36E					
Number			2 Northwest Avenue velland, TX 79336			er og men er er er men men er			1700' fn Lea Co.,	nl & 900' fel			
9171			Corpor		2.0				nea co.,	24 1			
Walter Chi	4	044 Pe	nbrook		23.	1 8 231	3		Same				
Etitalista er est		dessa,	<u>TX. 797</u>	62	- Account								
Spiritaria de la Compania de C													
<u> </u>			·										
Eller Collection Commence of the	Danie z				S 22.20	2.12.2.2.2							
***					Maria de la companya		Korrado s La Corrados						
IV. Prod	POD POD	ater				POD 10							
	102	ĺ			_	POD UL	STR Locati	ion and L	Jescription				
V. Well	Comple	tion Dat	a			.	·	·					
E Spud Date			²⁴ Ready Date		n TD			¹¹ PBTD		19 Perforations			
10-19-96		1	1-25-96		12,047					11458'-68'			
	" Hole Siz	:	31	Casing & Tubi	ing Size		11	Depth Se	t		³³ Sacka Cement		
17-1/2"			13-3/8"			412'			475				
12-1/4"			8-5/8"			4,215'				1700			
7-7/8	7-7/8"		5-1/		12,000'			905					
	m =			<u></u>									
VI. Well	Test D		Delivery Date	м «	Cest Date	1	N T *		¥ # * ·		# C== 5		
11-25		11/	19/	11-26-		1	"Test Les 2 hrs	• /	1250	.cm214	" Cag. Pro		
	ke Size_	1-11/	4 Oil		Water	┿	Gas		1230	OF	* Test M	othed	
16/64		241	482	0		4	0.0	BDD	, -		Flowin		
" I bereby cor	rufy that the	rules of the O	il Conservation	Division have b	cen complied				VOED::::	70.1			
knowledge and			The and con	menetic to the be	st of my		OI	T CO	NSERVAT	TON D.	IVISION		
Signature:			Approved by:										
Printed name:	even T	ipton					Title:						
Title: Sr. Drilling E			Enginee	ngineer				Approval Date:			JAN 07 1997		
	-30-96			405)848	3-3000								
" If this is a	change of o	perator fill in	the OGRID a	unber and nee	ne of the previ	ous oper	der -						
 	Presion	Operator Sig	racture		* ***	D1	ed Name			TW		Date	
H	4 107					rtusi	en Ligge			1.00	-		

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.
- 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
- The property code for this completion 7.
- R The property name (well name) for this completion
- 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
- Lease code from the following table:

Federal

Federal State Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe

13. The producing method code from the following table:

Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a 14.
- 15. 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 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.

- 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.)
- 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
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Inside diameter of the well bore 30.
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 32
- 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. MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- Length in hours of the test
- 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.
- MCF of gas produced during the test 43.
- 44. Gas wall calculated absolute open flow in MCF/D
- 45. The method used to test the well:

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 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.

