State of New Mexico

District II

511 South First, Artesia, NM 88210

District III

OIL CONSERVATION DIVISION 2040 South Pacheco

For: C-104 Revised October 18, 1994

Instructions on back Submit to Appropriate District Office

	Ka., Aztec,	NM 87410		Sai	nta Fe,	NM 87	7505					5 Cop	
District IV 2040 South Pach -	eco, Santa l	Fe, NM 87505								X	- 1711T	ENDED REPO	
<u>[</u>	R	EQUEST	FOR A	LLOWA	BLE A	ND AU	JTHOR	IZAT	ION TO TI	RANSF	ORT		
Chesar		perating	Operator no	une and Addre	186			\sim		1 OGR	ID Numb	er	
P. O. Box 18496						D IN THE POST			147179 Reason for Filing Code				
	oma Cit	y OK	6232470	496 ELOW.	IF YOU			<u> </u>	Correctin	g Pool	L Name	Code & Pool Co	
*API Number NOILEY THIS OFFICE. 30 - 025-33686 NE Shoe Bar-Strawn							Pool Name				* Pool Code		
⁷ Property Code						Property Name					96649		
19963			Lovin	gton 5					_		1 'w	ell Number	
		ocation	T=										
Ī	Section	Township	Range	Lot.ldn Feet from the North/Sou				East/West line Count		County			
T	4	16S	36E	<u> </u>	219	90	South		810	West		Lea	
т-	Ottom F Section	Iole Loca		r _			,						
Q Q	5	Township 16S	Range 36E	Lot Idn	Feet fr 228	rom the 87	North/South lin South		Feet from the 875	East/West line East		County Lea	
12 Lee Code	¹³ Producin	g Method Cod F	le ¹⁴ Gas	Connection Da	ite 15	C-129 Pern	it Number		C-129 Effective	Date	" C-1	29 Expiration Date	
I. Oil and	d Gas T	ransporte	rs	-\\	L	 -							
18 Transporte	18 Transporter			19 Transporter Name			* POD 21 O/G		22 POD ULSTR Location				
OGRID	Amo	and Address umoco Pipeline ICP				2818775		0	and Description			MUOD	
138648	502	502 Northwest Avenue				2010//3		Ü	Sec. 4-16S-36E 2190' FSL & 810' FWL				
	Lev	elland	TX 793	336					Lea Co.,		U FW	Ь	
24650				Co., LTD	2	2818776	(h	Æ	Same				
		artnersh D. Box 1	•					16	bame				
20100111 (0,000 (0,000), 0.6.)			NM 882	260		•							
					L.								
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wow.t.co.													
. Produce	ed Wate	er							· · · · · · · · · · · · · · · · · · ·				
" PO 2818777						" POD UL	STR Locat	ion and De	escription				
Well Co		n Doto											
25 Spud Da			ady Date		л TD				γ				
11-21-9	11-21-96 12-22		12,208			OLEA w		TD	Perforations » DH 11856-66¹		DHC, DC,MC		
1 7½" Hole Size			³² Casing & Tubing Size		Size	¹³ Depth Set		111030-00		³⁴ Sacks Cement			
12½"			13-3/8" 8-5/8"			450'			475 s	5X			
7-7/8"	7-7/8"		5½"			4268' 12208'			1550 s				
777 11 CD	$-\omega$		2-7/8	'tbg			0790'			1200 s	SX		
. Well Te	st Data			·									
	OB 21 71.	M Gas Deliv	livery Date 77 Test Date 03/21/97		/97	Test Leng 24 hr		gth CS.	* Tbg. Pre 300	ss ure	ure ** Csg. Pressur NA		
Date New 03/01/9) vvalei		4 Gas 727			4 AOF		-	Test Method	
	u d	4 Oi 441	- 1				1/1		NA		1	F	
Date New 03/01/9 "Choke Sin 16/64" hereby certify the	that the rules	441	servetion Div	O ision have here	complied				1721				
Date New 03/01/9	hat the rules	441	servetion Div	O ision have here	complied f my			L CON		ON DI	VISIC)N	
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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 $\mathbf{p} \ \mathbf{x}$ in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- 1. 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.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator (Include the effective date.)

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 5.
- 6. The pool code for this pool
- The property code for this completion
- The property name (well name) for this completion 8.
- 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.
- The bottom hole location of this completion 11.

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

The producing method code from the following table: Flowing Pumping or other artificial lift

- 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.
- 16. MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this completion 17.
- 18. The gas or oil transporter's OGRID number
- 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.
- Product code from the following table: 0 Oil 21.

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- 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 24. (Example: Tank",etc.)
- 25. MO/DA/YR drilling commenced
- 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
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore. 30
- Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 33.
- Number of sacks of cement used per casing string

If 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.

- 35. MO/DA/YR that new oil was first produced
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37. MO/DA/YR that the following test was completed

- 38. Length in hours of the test
- Flowing tubing asure oil wells Shut-in tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41. Diameter of the choke used in the test
- 42. Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- MCF of gas produced during the test 45. Gas well calculated absolute open flow in MCF/D
- 46. The method used to test the well:
 - Flowing

44.

- 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 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 48.