Natriet I 10 Box 1980, Hoioba, NM <b>85</b> 241-1980 Natriet II 10 Drawer DD, Artenia, NM <b>85</b> 211-0719 Naulet III				State of New Mexico Ty, Minerals & Natural Resources Department OIL CONSERVATION DIVISION						Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies			
District III 1909 Rio Brazos Rd., Aztee, NM 87410 District IV				PO Box 2 Santa Fe, NM 8								AMENDED REPORT	
PO Box 2088, Se						_			-				
[ <u>.                                    </u>										ON TO TR	<sup>3</sup> OGRID N		
Chesap	eake 0	perati	ıg,	<sup>1</sup> Operator name and Address g, Inc. 3154-0496 WELL HAS BEEN PLACED IN THE P THIS WELL HAS BEEN IF YOU DO NOT CO THIS WELL HAS BELOW. IF YOU DO NOT CO DESIGNATED BELOW. IF YOU DO NOT NOTIFY THIS OFFICE. NOTIFY THIS OFFICE.						JB 147179			
P. O.	Box 18	496		HAS BEEN PLA				DU DO NOI U			<sup>1</sup> Reason for Filing Code		
Oklahoma City, OK 73				3154-0496 WELL HIM BELOW. II						NW			
* A	<sup>4</sup> API Number				THIS WELL BELUTE NESIGNATED BELUTE NESIGNATED OFFICE				1			* Pool Code	
30-0 25-33686				West Lovington Strawn				۲			40875		
' Pr	' Property Code					Pro	ærty Na	me				' Well Number	
19963				LOVING	CON 5					···	1		
II. <sup>10</sup> Surface Location			_	Range Loi.ida Feet from the North/South Line Feet from the							East/West line County		
T 2		165		36E		2190		So.		810	w.	LEA	
	Bottom	Hole L	ocat	tion				I		L	I	<u>I</u>	
UL or lot no.		Township		Range	Lot Ida	Feet from	the	North/South line		Feet from the	East/West	t line County	
Q	5	16				2310	2287	? So.		250 875	ΤE	LEA	
<sup>12</sup> Lee Code	<sup>13</sup> Produ	cing Method	Code	e "Gas	Connection D	ale "C-1	29 Perm	út Number		" C-129 Effective	Date	<sup>17</sup> C-129 Expiration Date	
P		<u>F</u>								······			
III. Oil a		Transp			Veze		20 PC	n	" O/G	T	" POD ULS	TR Location	
OGRID				<sup>19</sup> Transporter Name and Address			100				and Description		
138648	1	Amoco Pipeline ICP				281	2818775		0	Sec 4, 16S-36E 2190' fsl & 810' fwl			
			Northwest Avenue 11and, TX 79336							Lea Co.,			
71150 Warren P		Pet	etroleum Co.,LTD Partner				ship 18776 E Same						
P.O. Box				m NM 88260					E	Same			
English and the second	and a state of the									2			
									N.N.				
Reference Construction	*****					n san kumu				*			
Sala Cali Cali che a cala Si cala cala cala cala cala cala cala cal	erster i A							en en de norme de la composition de la Composition de la composition de la comp		8 2			
IV. Prod		Vater											
	POD					1	' POD L	ILSTR Loc	tion and	Description			
281877									<u> </u>				
V. Well Completion Da			ata	<sup>14</sup> Ready Date						<sup>20</sup> PBTD <sup>10</sup> Performingan			
11-21-96			12-22-96			03-0:	<b>" 10</b> 1 <del>-97</del>	-97 12208 GR:-		<del>3926'</del>		"Performingan 3926" (1855- 11866	
* Hole Size				<sup>11</sup> Casing & Tubing Size			<sup>11</sup> Depth Se					<sup>30</sup> Sacks Cement	
17-1/2"				13-3/8"			450 <b>'</b>			475		<u></u>	
12-1/4	12-1/4"			8-5/8"			4,268'				1550		
7-7/8"	7-7/8"			5-1/2"			12,208'				1200		
				2-7/8" Tbg			10-790'						
	l Test	Data											
<sup>14</sup> Date New Oil		<b>×</b> G	Gas Delivery Date			<sup>24</sup> Test Date		" Test Length		<sup>34</sup> Tbg. Pressure		<sup>34</sup> Cag. Pressure NA	
	3-1-97 * Choke Size		41 Oil			3/21/97		24 hrs		300		Test Method	
	- Choke bise 16/64"		<b>OM</b> 441		0	<sup>4</sup> Water		<b>° G</b> ∎ 727		NA NA		Prod. Unit	
	10/01		of the Oil Conservation Division have t			been complied				1 6 4 / 1			
	the inform				implete to the b			C	DIL C	ONSERVA	TION E	DIVISION	
		1) h	lo				Аррг	oved by:			ተአሕወኑ/ ሰም	YTON	
Signanure: Garbara G Bale Printe name: Barbara J. Bale							Tide: DISTRICT   SUPERVISOR						
Title							Appr						
Re	Regulatory Anal				<u>Phone:</u> (405)848-8000				Approval Date: MAY 08 1997				
Date:  04-17-97  PROM: (405)848-8000    • If this is a change of operator fill in the OGRID number and name of the previous operator													
						<b></b>	<b></b>						
	Previo	ons Operator	Sign	ature			Pr	inted Name			T	ile Date	

JC

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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 bar

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
- 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.
  - 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
- 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.
- 11. The bottom hole location of this completion
  - Lease code from the following table: F Federal S State P Fee J Jicarilla

12.

- NU
- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table:

   F
   Flowing

   P
   Pumping or other artificial lift
  13.
- 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 17. completion
- 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.
- 21 Product code from the following table: Gas

- 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.) ٦2.
- 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.
- 27. 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.

- MO/DA/VB 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 wells 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
- 44 Gas well calculated absolute open flow in MCF/D
  - The method used to test the well:
  - Flowing P

45.

- Pumpin Swabbi
- S Swabbing If other method please write it in.
- The signature, printed name, and title of the persor 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 longe operates this completion, and the date this report were signed by that person 47