District [ 10 Box 1980, Hoister, NM 88241-1980 District []				State of New Mexico 7, Minerala & Natural Resources Department OIL CONSERVATION DIVISION						Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office			
*) Drawer DD, Artesis, NM 88211-0719 District III 000 Rio Brazzo Rd., Axtor, NM 87410 District IV				OII	PO B	ox 2088				AMENDED REPORT			
O Box 2088, Sa	nta Fe, NN	1 87504-201						וידינו	7 4 17	ION TO TR			
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Chesapeake Operating, Inc.										147179			
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			1	rawn - <del>deat</del>	Ves	5+-1	Lovin	66"10' spf 60 holes			* Pool Code 40875 'Well Number		
' Property Code				LOVINGTON 5						1			
19963 II. <sup>10</sup> Surface Location													
Ul or lot no.	Section	Towne		Range Lot.id		in Feet from the		North/South Line		Feet from the	East/West line	County	
т	4	165	;	36E		2190		So.		810	W	LEA	
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UL or lot no.	Section	Township		Range	Lot Ida			North/South line		Feet from the	East/West line	County	
Q	5	165		36E		2310		So.		750	E	LEA	
" Lae Code P					<sup>14</sup> Gas Connection Dat		" C-129 Pt	rmit Number		" C-129 Effective	Date <sup>17</sup> C-129 Expiration Date		
III. Oil and Gas Trans			Orters				20	• POD <sup>11</sup> O/G		" POD ULSTR Location			
OGRID				and Address				<b>A</b>		0 - 1	and Description		
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2818			)ata		<u> </u>								
V. Well Comp				<sup>M</sup> Ready Date		7		TD		" PBTD		" Perforations	
" Hole Size				" Casing & Tubing Size				<sup>11</sup> Depth Set			<sup>33</sup> Sacks Cessent		
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	l Test	Data											
<sup>14</sup> Date	<sup>14</sup> Date New Oil		Gas Delivery Date			<sup>14</sup> Test Date		" Test Length		" Tbg.	Pressure	<sup>10</sup> Cog. Pressure	
# Chatte Cia			4 08					d' Gas			AOF	4 Test Method	
" Choke Size				ON		<sup>d</sup> Water		" Gas					
4 I hereby or	stify that a	be rules of t	he Oil (	Conservation	Division have	been co	maplied I						
with and that	the inform				mplete to the			1	OILC	CONSERVA	TION DIV	ISION	
knowledge and bellef. Signature: Baubara A Balo								Approved by: ORIGINAL SIGNED BY					
Printed matter: Barbara J. Bale								GARY WINK Tide: FIELD REP. II					
Tide: Regulatory Analyst								Approval Date: MAR 10 1997					
Detc:	Regul	atory	Anal		(405)84	8-80	00			<u></u>		160	
		l energiar	اد عا الت		(405)04			- operator					
										<u> </u>			
	Previ	ous Operat	or Sign	ature				Printed Nam			Title	Date	
4													

## 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.

## 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

   CG
   Change oil/condensate transporter

   RG
   Add gas transporter

   RG
   Change gas transporter

   RT
   Request for test allowable (Include volume requested)

  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.
- 8. The property name (well name) for this completion
- 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 Jicarille

12.

- Ň
- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: F Flowing P Pumping or other artificial lift 13.
- 14. MO/DA/YR that this completion was first connected to a 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
- 17. MO/DA/YR 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
- 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.

- 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 Tank", etc.) 24.
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26.
- 27 Total vertical depth of the well
- 28. Pluoback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. Inside diameter of the well bore
- Outside diameter of the casing and tubing 31.
- 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 MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 36.
- 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:

45.

- F Flowing P Pumping S Swebbing If other method please write it in.
- The signature, printed name, and title of the persor authorized to make this report, the data this report was signed, and the telephone number to call for question-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 was signed by that person 47.

