## State of New Mexico

Form C-104 Revised February 10, 1994 Instructions on back

Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

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AMENDED	REPORT

10 Drawer DD, Artesia, NM 88211-6719 1000 Rio Brame Rd., Aziec, NM 87410

District IV

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PO Box 2088.	Sente Fe.	NM	87504-20	6

21436

REQUE	ST FOR ALLOWABLE AND A	UTHORIZATION TO TR	ANSPORT
	Operator name and Address		¹ OGRID Number
P. O. Box 18496 Oklahoma City, OK	73154 0496 BELON: IF YOU DO NO	NW NW	Resean for Filing Code
* API Number 30 - 0 25-34093	N.E. LOVINGTON-PENN	2-1097211198	' Pool Cede
15	! Passage	Name	' Well Number

	II. 10 Surface Location   North (South Line   Fast/West line   County									
1	Ul or lot so.	Section	Township	Range	Lot.ldn	Feet from the	North/South Line	Feet from the	Fact Mest mas	County
	5-1	6	16S	37E		2383	North	946	west	LEA

EASLEY 6

11 }	Bottom 1	Hole Loca	ion							
UL or lot mo.	Section	Township	Range	Lot ida	Feet from the	North/South	line	Feet from the	East/West his	Le County
13 Lee Code	<sup>13</sup> Produci	ng Method Code	" Gas	Connection Date	1 C-129 Perun	it Number	'	C-129 Effective i	Date "	C-129 Expiration Date
1 2 1	l 7		1 10	122/12					i	

III. Oil and Gas Transporters " POD " POD ULSTR Location " O/G and Description OGRID and Address Sec 6, 16S-37E 2383' fnl & 946' fwl Sun Company, Inc. (R&M) 2820064 10 021778 Lea Co., NM Warren Petroleum Co., LTD-P 2820065 Same P. O. Box 1689 Lovington, NM 88260

## Draduced Water

IV. Produced water	
" POD	<sup>14</sup> POD ULSTR Location and Description
28200 66	

Well Completion Data

" Spud Date	<sup>34</sup> Ready Date		מד"	» PB1		1º Perforations	
08-22-97	10-26-97	11,95	2'			11623-11668'	
<sup>30</sup> Hole Size	31 Casing &	31 Casing & Tubing Size		33 Depth Set		<sup>33</sup> Sacks Coment	
17-1/2"	13-3/8"		500'		495	sx	
11"	8-5/8"		4,380'		2526 sx		
7-7/8"	5-1/2"		11,952'		1805	sx	
	2	7/8 @	11521				

## VI Well Test Data

AI' MEIT I COLT	7 a ua					
M Date New Oil	M Gas Dalivery Date	M Test Date	" Test Length	" Tbg. Pressure	" Cag. Frances	
10-26-97	10-27-97	10-26-97	6 hours	1225#	0	
" Choke Size	44 Oil	4 Water	<sup>4</sup> Gas	" AOF	" Test Method	
12/64"	78	0	125	NA	F	

12/64"	78	U	12	5	1411			
with and that the information	ules of the Oil Conservation Div in given above is true and comple	ision have been complied etc to the best of my	O	IL CO	VSERVAT	ION DI	VISION	
knowledge and belief. Signature:	Pale		Approved by:	RIGINAL E DIST	RGNED BY C TRICT I SUPE	HRIS WIL	LIAMS	
Printed asset:  Barbar	ra J. Bale		Title:					
Title: Regul.	atory Analyst		Approval Date:	MUA	4 1997			
Date: 10-27-97		05)848-8000						
" If this is a chance of or	parater fill in the OGRID netm	her and name of the pre-	viens operator					

I is a create of obstates for an end Contro sermon man some	s of the history about		
Previous Operator Signature	Printed Name	Title	Date

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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 w

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

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.
- Reason for filing code from the following table: 3.

NW RCH CHO CAG CG

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
- 7. The property code for this completion
- 8. 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.
- The bottom hole location of this completion 11.
- 12. Lease code from the following table:

Federal State Fee Jicarilla

S

N Neveio

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.
- 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.
- 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. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. Inside diameter of the well bore
- 31. Outside diameter of the casing and tubing
- 32. Depth of casing and tubing. If a casing liner show top and
- 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/YR 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
- 45. The method used to test the well:

F Flowing
P Pumping
S Swebbing
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.

