State of New Mexico
Exercy, Minerals & Natural Resources Department

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

Previous Operator Signature

NO Drawer DD, Artesia, NM 88211-0719 District III				OIL CONSERVATION DIVISION						Submit to Appropriate District Office					
1000 Rio Brasos Rd., Aziec, NM 87410				PO Box 2088 Santa Fe, NM 87504-2088						5 Copies					
District IV PO Box 2001, S	anti Fe, NM	87504-208 8	} ·			•						AM	ENDED REPORT		
<u>I.</u>	RI						D AU	THOR	TASE	T OT MOI					
Operator same and Address Manzano Oil Corporation										OGRID Number					
P.O. Box 2107									,	* Reason for Filing Code					
Roswell, NM 88202-2107															
'API Number				¹ Po				.e.		NW * Pool Code					
30 - 0 25 - 34238				NE Lovington P				_			40760				
Property Code				LAS:				004		' Well Number					
	2178			State "3"									· 1		
II. 10 S	Surface I	_OCATIO	Range Lot.ida Feet from					Now Yo		Feet from the	1 8- 4	East/West line County			
	G 12 16S		36E			214		North/South Line North		2087'	1	East	· . '		
	¹¹ Bottom Hole		!		 .					2007	Lust		Lea ·		
UL or lot no. Section, Township			Range	Lot Idn			he North/South line		Feet from the	Fast	West line	County			
G				36E		1	4' Nor			1		East	Lea		
12 Lee Code	15 Products		Code		Connection D			it Number		C-129 Effective			-129 Expiration Date		
S		F		2/2	26/98										
III. Oil a					•										
Transporter 0GRID				Transporter Name and Address				D	" 0/G	POD ULSTR Location and Description					
007440 E.O.T.T.								655							
P.O. B		 Box 	OX 1188 6556							0 0	10	T1.CC	DOCE		
000				TX 77251-1188						G, Sec	12,	1105,	R36E		
9171 GPM Gas Co				orp. 5050				656	· G	,					
Bartlesvi										G, Sec 12, T16S, R36E					
				•											
							A 100		¥.						
				**************************************			O Zamani Dalio V				*				
IV. Prod	uced Wa	ter													
	POD					· . ·	[™] POD U	LSTR Loc	ation and	Description					
282E	657									·			•		
V. Well		on Dat	a				•	- 							
L Spud Date				H Ready Date				-		" PBTO			3º Perforations		
1/4/98				2/16/98 11					<u> </u>	11,650'			534-550'		
* Hole Size				" Casing & Tubing Size					" Depth S				cks Cement		
17-1/2"			-	13-3/8"					400'						
11"				8-5/8"				4	,371'	KB			+ 200 C1 C		
7-7/8"			5-1/2"			_	11	.700'	KB	1st 2nd		300 Super C 150 Lite + 50			
				2-	-7/8"			11	,420'	KB			Super C		
VI. Well			Dalia	name Data		Tool Date		21 25 1		N 75-	D		H Cag. Pressure		
2/14/98			Cas Delivery Date 2/26/98		2/17/98			" Test Length 24 hrs		* Tog. Pressure 850			pkr		
" Choke Size			" Oil		4 Water			4 Gu		# AOF		" Test Method			
15/64"		4	405			0		390				F			
" I hereby certify that the rules of the Oil Conservation Division have been complied															
with and that the information given above is true and complete to the best of my knowledge and belief.								OIL CONSERVATION DIVISION							
Signature: allog Journandy								Approved by: ORIGINAL SIGNED BY							
Printed name: Allison Hernandez								Tide: GARY WINES							
Tide: Engineering Technician							Approval Date: ACR 27 HUH								
Date: 2/27/98 Phone: (505) 623-1996								~ 1 1990							
" If this is a		retor fill le	the				rrious ope	relor							
	ure		Pri	Printed Name Title Date											

New Mexico Oil Conservation Division C-104 Instructions

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.
- 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
- 7. The property code for this completion
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- 10. 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.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:
 F Federal
 S State
 P Fae
 J Jicarilla
 N Navajo
 U Ute Mountain Ute
 I Other Indian Tribe
- 13. The producing method code from the following table:

 F Flowing
 P Pumping or other artificial lift
- 14. MO/DA/YR that this completion was first connected to a gas transporter
- 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
- 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
- 20. 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.
- 21. Product code from the following table:
 O Oil
 G Gas

- 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.]
- 23. 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.
- 24. 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.)
- 25. MO/DA/YR drilling commenced
- 26. 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
- 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 bottom.
- 33. Number of eacks 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
- 37. Length in hours of the test
- 38. Flowing tubing pressure oil wells Shut-in tubing pressure - gas wells
- 39. Flowing casing pressure oil wells Shut-in casing pressure gas wells
- 40. Diameter of the choke used in the test
- 41. Sarrels of all 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 teet the well;
 F Flowing
 P Pumping
 S Swabbing
 If other method please write it in.
- 46. 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