

District I
PO Box 1900, Hobbs, NM 88241-1900
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

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

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Chesapeake Operating, Inc. P. O. Box 18496 Oklahoma City, OK 73154-0496		OGRID Number 147179
		Reason for Filing Code NW
API Number 30 - 0 25-35006	Pool Name Townsend Morrow	Pool Code 86400
Property Code 24402	Property Name Boyce 15	Well Number 3

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West line	County
H	15	16S	35E		2310	North	341	East	Lea

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
H	15	16S	35E		2410	N	443	E	
Lee Code P	Producing Method Code F	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
021778	Sunoco Inc. (R&M) P. O. Box 2039 Tulsa, OK 74102	2826566	0	Sec 15, 16S-35E 2310' fnl & 341' fel Lea Co., NM
24650	Dynegy Inc. 1000 Louisiana, Suite 5800 Houston, TX 77002	2826567	G	Same

IV. Produced Water

POD	POD ULSTR Location and Description
2826568	

V. Well Completion Data

Spud Date	Ready Date	TD	FBTD	Perforations
04/15/00	08/17/00	11,900'		11,770-780'
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
17-1/2"	13-3/8"	444	490	
12-1/2"	9-5/8"	4200'	1640	
7-7/8"	5-1/2"	11,900'	1470	
2-7/8" tbg		11,700'		

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Cog. Pressure
08/17/00	08/17/2000	08/25/2000	24	200 PSI	0
Choke Size	OG	Water	Gas	AOF	Test Method
22/64	25	4	208		Flow.

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.

Signature:

Randy Gasaway

Printed name:

Randy Gasaway

Title:

Asset Manager

Date: 08/30/00

Phone: (405) 848-8000

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED BY CHAS WILLIAMS

Title:

DISTRICT SUPERVISOR

Approval Date:

If this is a change of operator fill in the OGRID number and name of the previous operator:

Previous Operator Signature

Printed Name

Title

Date

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IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

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 the 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 the 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 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

36. MO/DA/YR that the following test was completed

37. Length in hours of the test

38. Flowing tubing pressure - oil wells

39. Shut-in tubing pressure - gas wells

40. Flowing casing pressure - oil wells

41. Shut-in casing pressure - gas wells

42. Diameter of the choke used in the test

43. Barrels of oil produced during the test

44. Barrels of water produced during the test

45. MCF of gas produced during the test

46. Gas well calculated absolute open flow in MCF/D

The method used to test the well:

Flowing

Pumping

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

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:

Gas

Oil

Other

Reason for filing code from the following table:

New Well

Recompletion

Change of Operator

Add oil/condensate transporter

Change oil/condensate transporter

Add gas transporter

Change gas transporter

Request for test allowable (include volume requested)

If for any other reason write that reason in this box.

The API number of this well

The name of the pool for this completion

The pool code for this pool

The property code for this completion

The property name (well name) for this completion

12. Lease code from the following table:

Federal

State

Private

Other Indian Title

13. The producing method code from the following table:

Flowing

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

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