District I PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artenia, NM 88211-8719 District III			State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION						Form C Revised February 21, Instructions on Submit to Appropriate District O		
District III 1000 Rie Brazo District IV					PO Bo	x 2088				_	5 Co MENDED REPO
PO Box 2088, : [_			FOR A	LLOWAB	LE A	ND AU	JTHOR	IZAT		RANSPOR	т
D-11-	- Duad	uction,]	•	ame and Address						¹ OGRID Nu 005736	mber
				uite 200						Reason for Fili	ne Code
Dalla	s, TX.	75206								ective 11	
-	API Number	-				Pool Nam					* Pool Code
30 - 0 25-03134 Property Code 011497/5942			VACUUM DEVONIAN, SOUTH						62010		
			South Vacuum Unit ,26						001		
II. ¹⁰ Surface Locati		Location		·····							
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		Hole Loc					<u> </u>				
UL or lot no.		Township	Range	Lot Ida	Feet fro	m the	North/So	uth line	Feet from the	East/West line	County
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⁴ Lae Cede S	" Produc	ing Method Co	de "Gas	Connection Date	" " C	:-129 Perm	it Number		C-129 Effective	Date 0	C-129 Expiration De
II. Oil a	nd Gas	Transport	ers					<u> </u>	· · · · · · · · · · · · · · · · · · ·	I	
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F THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT IF

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

3.

5.

- 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:

 NW
 New Well

 RC
 Recompletion

 CH
 Change of Operator

 AO
 Add oil/condensate transporter

 CO
 Change oil/condensate transporter

 AG
 Add gae transporter

 CG
 Change gas transporter

 RT
 Request for test allowable (Include volume requested)
 - If for any other reason write that reason in this box.
- The API number of this well 4.
 - 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
- 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.

JNU

- Navajo Ute Mountain Ute Other Indian Tribe
- 13. The producing method code from the following table: Flowing Pumping or other artificial lift P
- 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.
- MO/DA/YR of the C-129 approval for this completion 16
- MO/DA/YR of the expiration of C-129 approval for this 17. 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.
- MO/DA/YR drilling commenced 25.
- 28 MO/DA/YR this completion was ready to produce
- 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
- 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/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
- 38. Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- Barrels of oil produced during the test 41.
- 42. Barrels of water produced during the test
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- 45 The method used to test the well:
 - Flowing Pumping Swabbin

 - 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.



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