1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 88210

District III 1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

State of New Mexico Energy, Minerals & Natural Resources

Form C-104 Revised March 25, 1999

Submit to Appropriate District Office

5 Copies

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District IV 2040 South Pach	heco, Santa F	e. NM 87505									AM	IENDED REPORT	
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			•	ame and Address OIL COMPANY				!	<sup>2</sup> OGRID Number 33016				
8080 N CENTRAL EXPRESSWAY #660							Reason for Filing Code						
• ^	API Number		DALLAS	S, TX 75206	•	<sup>5</sup> Pool Nam	ne		∏ <del>∆y</del> Ci	H EFFEC		. 11/1/99 Pool Code	
30 - 025-20010 CORBIN A													
						roperty Na STATE 35				* Well Number 003			
П. <sup>10</sup> S	Surface I	Location										003	
Ul or lot no.	Section 35	Township 17S	Range 33E	Lot.ldn	Feet fron 1650	From the North/South Line S		Feet from the 330	East/West W	t line	County LEA		
I	Bottom I	lole Locat	lio <u>n</u>										
UL, or let no.	Section	Fownship	Range	Lot 1dn	Feet from	m the	North/Sc	outh line	Feet from the	East/West	t line	County	
12 Lse Code	13 Producie	ing Method Code P	e 14 Gas	Connection Date	"(	C-129 Pers	mit Number		16 C-129 Effective I	Date	" C-	-129 Expiration Date	
		ransporters	S										
" Transpor OGRID		1. A.	Fransporter l			" P(	)D	" O/G		22 POD ULS and Des			
009171		GPM GAS (		4 PENBROOK		2544	730	G		freeze a	<u>Magazi</u>	JII.	
		OF	DESSA, TX 7	79762									
21778		SUNOCO, INC	C., 1004 N B	IG SPRING #575	,	2544	710	O					
		Mil	DLAND, TX	. 79701		and the Mark to start car	lar of the state of the state of	a de la companya de l		· · · · · · · · · · · · · · · · · · ·	<del></del>		
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WANTED.			·				12. 11. 12. 12.						
IV. Produ		er											
2544750	POD					24 POD U	LSTR Locat	tion and D	escription				
V. Well C	Compl <u>eti</u> e	on Data_											
<sup>15</sup> Spud 12/9			eady Date 1/28/63		<sup>27</sup> TD 8794'		n PB.	TD	29 Perfora	itlons		<sup>Jn</sup> DHC, MC	
	31 Hole Size			Casing & Tubing		33 Depth Set					24 Sacle	ks Cement	
												3 Coco	
VII Walls	T 4 D.4												
VI. Well 7  Date No.		36 Gas Deli-	ivery Date	37 Test	t Date		31 Test Length		39 Tbg. Pressure		Т	40 Csg. Pressure	
4 Choke	e Size	41 C	Oil	4 W	ater		44 Gas		45 AOF		├—	46 Test Method	
		<u> </u>	·					·				Test Method	
47 I hereby certif with and that the knowledge and I Signature:	e information	given above is to	rue and compl	vision have been co plete to the best of a	omplied my	Amaron		IL CO	NSERVAT	TON DI	VIS!	ION	
Signature: Casson Printed name: Casson Protect					Approved by:								
Frinted name: CASSONDICA FOSTER  Lide: MANAGER LAND AND MARKETING					Title:								
Date: 11/13/99		Dimmer	Phone: 214	1 901 9461		Approval Date:							
	nange of opera	ator fill in the ()		per and name of th	he nreviou	s operator			4		===		
			QUESTAR	R EXPLORATIO				'ANY	023846		- '	. •	
	Previous O	)perator Signatu	ire / V	<i>X</i> ( ) /		Print	ted Name			Title	ė	Date	

G. L. NORDLOH

PRESIDENT AND CEO

11/12/99

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 despensed 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 filled for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- Operator's name and address 1.
- 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.

HC

CH AO

riew vveil Recompletion Change of Operator Add oil/gondensate transporter Change oil/condensate transporter

CO AG

Add gas transporter
Change gas transporter
Request for test allowable (include volume requested)
Add gas transporter
Requested) ŘΤ

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 Б.
- The pool code for this pool в.
- The property code for this completion 7.
- The property name (well name) for this completion 8.
- The well number for this completion 9.
- 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. 10. Otherwise use the OCD unit letter.
- The bottom hole location of this completion 11.
- Leave gode from the following table: 12. Federal

State s

p Fae

Josella

Navelo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table: 13.

Flowing Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a
- 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/DAIYR of the expiration of C-129 approval for this 17. completion
- The gas or oil transporter's OGRID number 10.
- Name and address of the transporter of the product 18.
- 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: 21. Gas
- The ULSTR location of this POD II it is different from the well completion location and a short description of the POD (Exemple: "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", sto.) 24.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 20.

bottom.

Number of sacks of cement used per casing string 33.

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 oll was first produces
- MO/DA/YR that gas was first produced into a pipeline 35.
- MO/DA/YR that the following test was completed 36.
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing easing pressure oil wells Shut-in easing pressure gas wells 39.
- Diameter of the choke used in the test 40.
- Barrels of all produced during the test 41.
- Barrals of water produced during the test 42.
- MCF of gas produced during the test 43.
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well: 46. Flowing þ

p Pumping .
B Swabbing
If other method please write it in.

- The signature, printed name, and this of the person authorized to make this report, the date this report was signed, and the telephone number to oall for questions about this report 48.
- 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 increased by that present 47. signed by that person

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