## State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office 5 Copies

District II PO Drawer DD, Artesia, NM 88211-0719 OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV PO Box 2088, Santa Fe, NM 87504-2088 ☐ AMENDED REPORT REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT T. Operator name and Address, LTD CO. M.N.A. Enterprises, OGRID Number c/o Oil Reports & Gas Services, Inc. P. O. Box 755 124768 Reason for Filing Code Hobbs, New Mexico 88241 CH Effective 12/1/94 API Number Pool Name 30 - 025 - 22484 Pool Code Arkansas Junction San Andres 02500 Property Code Property Name Well Number Lea OR State 016389 10 Surface Location II. Ul or lot no. Section Township Range Feet from the North/South Line | Feet from the East/West line County 18S 36E 1980 South 1980 11 Bottom Hole Location West Lea Section Township Lot Ida Feet from the North/South line Feet from the Fast/West line County 36E 1980 SOUTH 1980 12 Lee Code WEST 15 Producing Method Code 14 Gas Connection Date 4 C-129 Permit Number " C-129 Effective Date " C-129 Expiration Date S 12/18/68 Oil and Gas Transporters Transporter OGRID " Transporter Name " POD 11 O/G 2 POD ULSTR Location and Address and Description Navajo Refining Co. 015694 1206310 O P. O. Box 159 Unit K: 12-T18S-R36E Artesia, NM 88211-0159 Warren Pet. Co. 024650 1206330 G P. O. Box 1589 Unit K: Tulsa, OK 74102 12-T18S-R36E Produced Water POD и POD ULSTR Location and Description Unit K: 12-T18S-R36E Well Completion Data Spud Date 14 Ready Date n ID " PBTD " Perforations " Hole Size 31 Casing & Tubing Size 11 Depth Set Backs Cement Well Test Data Date New Oil " Gas Delivery Date " Test Date " Test Length " The. Pressure " Cag. Pressure " Choke Size 4 OII 4 Water G Gas " AOF Test Method 4 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 bolief. OIL CONSERVATION DIVISION Signature: Approved by: Printed name: Laren Holler CT SUPERVISOR Title: JAN 17 Agent Approval Date: Date: Phone (505) 393-2727 1/12/95 ef If this is a change of operator fill in the OGRID number and name of the previous operator Mack Energy Corporation OGRID #013837 Crissa D. Carter, Production Clerk Previous Operator Signature 12-16-94

Printed Name

Date

## New Mexico Oil Conservation Division C-104 Instructions

## F 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.

mproperly filled out or incomplete forms may be returned to pperators unapproved.

## 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.

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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.

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

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. 0.

The bottom hole location of this completion

Lease code from the following table:
F Federal
S State
P Fee
J Jicarilla 2.

SPJNU

Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table:
F Flowing
P Pumping or other artificial lift

MO/DA/YR that this completion was first connected to a gas transporter

The permit number from the District approved C-129 for this completion

MO/DA/YR of the C-129 approval for this completion

MO/DA/YR of the expiration of C-129 approval for this

The gas or oil transporter's OGRID number

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.

Product code from the following table:

- 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.)
- 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
- 26. 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 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.

- 34. MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 35.
- MO/DA/YR that the following test was completed 36.
- 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 Swabbing
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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JOD HOBBS OFFICE