District I PO Box 1990, E District II PO Drawer DD, District III 1000 Rio Brasso	, Artonia, N	M \$1211-8719	C	JIL CONS	ERVA		n Departas DIVISI		Subm		Form C-10 d February 10, 199 Instructions on bac priate District Offic 5 Copie
District IV PO Box 2088, S T											MENDED REPORT
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	PI Number)					CO E1	ffective	10-1-95.
30 - 0 25-			Hot	bbs Drinka		⁴ Pool Name					* Pool Code
	operty Cod	•				Property Nas		<u> </u>			Well Number
0001		<u> </u>		ate "A"							5
II. 10 (U or jot mo.	Section	Location Township	Range	Lot.Ida	Feet from	m the	North/Sou	th Line	Feet from the	L a last	
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UL or lot po.	Section	Township	Range	Lot Ida	Feet fro	on the	North/Sou	oth line	Feet from the	East/West Es	e County
¹¹ Las Code	¹³ Produc	ing Method Co	ode 14 Gas	Connection Date	1 10	C-129 Permi	Number	1 1	C-129 Effective I	[
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III. Oil an		the second s								<u>.</u>	· · · · · · · · · · · · · · · · · · ·
OGRID			Transporter l and Addres			²⁸ POD		^и О/G	2	² POD ULSTR and Descrip	Location ption
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IV. Produ	iced W				4 (4) 						
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V. Well (Complet and Date	tion Data									
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VI. Well	Test Da	ita	<u></u>					·····	A.r		
" Dete No	ew Oil	²⁶ Gas De	elivery Date	³⁶ Test	Date		Test Leng	th .	* Tbg. Pre	******	* Cog. Pressure
" Cheke	Size		OB	4 Wa			4 Gas				
				·					- vo	′	" Test Method
" I hereby certify with and that the knowledge and b Signature:	S INFOLIATION	tes of the Oil C given above in	conservation Di	ivision have been picts to the best of	complied my	Approved	0	RIGIN	NSERVATION AL SIGNED BY DISTRICT 1 501	(JERRY SE)	
Printed name:	<u>R. L</u> . I	Wheeler,	Jr.			Title:	····			SA VISUK	
	Admin.	Svc. Co				Approval	Dele:	+ · · · ·		SEP	15 1995
Dele: 9-8	-95		Phone: 50	05 393-21	44		· · · ·	200 C			· · ·
	alige of ope	reter fill in the	I OGRID as	sher and name of		lous operate					

Previous Operator Signature

Printed Name

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Report all ol A request for accompanies accompanies accordances All sections new and rec Fill out only changes of other such of A separate completion. Improperty operators uf 1. Or 2. Or 3. Re 3. Re 3. Re 4. Th 5. Th 6. Th 7. Th 8. Th 9. Th 10. Th 10. Th 11. Th 11. Th	C-104 must be filed for each pool in a multiple filled out or incomplete forms may be returned to napproved. perator's name and address perator's OGRID number. If you do not have one it will assigned and filled in by the District office. Asson for filing code from the following table: W New Well C Recompletion H Change of Operator O Add oil/condensate transporter Change oil/condensate transporter G Add gas transporter G Add gas transporter	 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. The foi conduct 34. 35. 36. 	 (Example: "Bettery A", "Jones CPD", stall The POD number of the storage from which water is moved from the property. If this is a new well or recompletion and this POD has no number the district effice will assign a number and write it here. 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) MO/DA/YR drilling commenced MO/DA/YR this completion was ready to produce Total vertical depth of the well Plugback vertical depth Top and bottom perforation in this completion or casing shoe and TD if openhole Inside diameter of the well bore Outside diameter of the casing and tubing Depth of casing and tubing. If a casing liner show top and bottom. Number of sacks of cement used per casing string store. MO/DA/YR that new oil was first produced MO/DA/YR that gas was first produced into a pipeline
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6. Th 7. Th 8. Th 9. Th 10. Th 10. Th 11. Th	te pool code for this pool		MO/DA/YR that the following test was completed
7. Tr 8. Tr 9. Tr 10. Tr 10. Tr 11. Tr		37.	Length in hours of the test
8. Tr 9. Tr 10. Tr Jo fo Ot 11. Tr	ne property code for this completion	38.	Longth in nours of the test Flowing tubing pressure - oil wells
9. Th 10. Th Ui fo Of 11. Th	La construction de la constructi		Shut-in tubing pressure - gas wells
10. Th Ui fo O1 11. Th	he property name (well name) for this completion	39.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
	he well number for this completion	40.	Diameter of the choke used in the test
11. Th	he surface location of this completion NOTE: If the nited States government survey designates a Lot Number	41.	Barrels of oil produced during the test
	r this location use that number in the 'UL or lot no.' box. therwise use the OCD unit letter.	42.	Barrels of water produced during the test
12. Le F	he bottom hole location of this completion	43.	MCF of gas produced during the test
	ese code from the following table: Federal	44.	Gas well calculated absolute open flow in MCF/D
S P J Ni	State Fee Jicarille Navajo Ute Mountain Ute	45.	The method used to tast the well: F Flowing P Pumping S Swabbing
13. Tr F	Other Indian Tribe he producing method code from the following table: Flowing	46.	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
14. M	Pumping or other antificial lift		about this report
ga ga	O/DA/YR that this completion was first connected to a stransporter	47.	The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to varify that the previous operator no longer
th	is completion	•	operates this completion, and the date this report was signed by that person
	O/DA/YR of the C-129 approval for this completion O/DA/YR of the expiration of C-129 approval for this		nan an
CC	Simpletion		
	he gas or oil transporter's OGRID number		· · · ·
	ame and address of the transporter of the product		··· · · · ·
OF OF	he number assigned to the POD from which this product ill be transported by this transporter. If this is a new well recompletion and this POD has no number the district fice will assign a number and write it here.		
21. Pr	oduct code from the following table:	· -	.
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