District I PO Bex 1980, Hobbs, NM 88241-1980 District II

PO Drawer DD, Artesia, NM \$8211-0719

OIL CONSERVATION DIVISION

State of New Mexico
Energy, Minerals & Natural Resources Department

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

| Netrict III | | | O | | PO Bo | x 2088 | | ION | 34011 | iii io Ap | propria | 5 Copie | | |
|--|---------------|--------------------------------|---------------------|---------------------------------------|-----------------------|---------------|----------------|---------------|---------------------------------------|----------------------------|---------------------------|---------------------------------------|--|--|
| 1000 Rio Brazos Metrict IV | Rd., Axtec | , NM 87410 | | Santa | Fe, NM | 1 87504 | 1-2088 | | | Ė | LAME | NDED REPOR | | |
| PO Box 2008, S | | | 7 FOD 4 | | nz = | | | | | لـا | | NUEU KEPUK | | |
| | R | EQUES" | | | | ND AU | THOR | TASE | ON TO TR | | | | | |
| Operator name and Address | | | | | | | 01474 | | | | ¹ OGRID Number | | | |
| Mewbourne Oil Company P. O. Box 7698 | | | | | | | 014/44 | | | | Reason for Filing Code | | | |
| Tyler, Texas 75711 | | | | | | | Char Anad | | | | age Property Name From | | | |
| • | | | | | | | Pool Name | | | | ' Pool Code | | | |
| 30 - 0 25- | | | Quere | een Associated | | | ı | 50580 | | | | | | |
| ን የተ 15343 | reperty Code | | 0 | Property Name Assoc Sand Unit | | | | ' Well Number | | | | | | |
| | | Location | | ASSOC BANG UNIT | | | | 26 | | | | | | |
| Ul or lot no. | Section | Township | Range | Lot.lda | Feet from | n the | North/S | with Line | Feet from the | East/We | ot Ene | County | | |
| K | 27 18S 3 | | 32E | 32E 165 | | | Sou | th | 1980' | ' West Lea | | Lea | | |
| 11] | Bottom | Hole Lo | cation | | | | | | ··· | · | · | | | |
| UL or lot no. Section | | Township | Range | Lot Ida | Feet fro | m the | North/S | outh line | Feet from the | East/We | cat Lac | County | | |
| 12 Lac Code | " Produci | ng Method C | ode 14 Gas | Connection De | ute 14 (| C-129 Perm | it Number | | C-129 Effective I | Date | " C-1 | 29 Expiration Date | | |
| F | L | Inj. | | | | | | | | | | | | |
| | | Transpor | | | | ···· | | | | | | | | |
| "Transporter OGRID | | " Transporter Name and Address | | | | " POD " 0/G | | " O/G | 22 POD ULSTR Location and Description | | | | | |
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| V. Produ | iced Wa | iter | | <u>:</u> | | | | | | | | | | |
| . " | POD | | - | · · · · · · · · · · · · · · · · · · · | | " POD UL | STR Local | lon and D | escription | | | | | |
| / : Well (| Zamalai | ian Data | · . | · | | | | | | | | | | |
| V. Well (| Complete | ion Data | 24 Ready De | | - | " TD | r | | 11 00000 | | | | | |
| Spec Date | | | Ready Date | | | - 15 | | | " PBTO | | 1º Perforations | | | |
| M Hole Size | | · "Casing & Tubing Size | | | ¹¹ Depth S | | Depth Set | <u> </u> | | ³³ Sacks Coment | | | | |
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| | | | | | | | | | | | | | | |
| /I. Well | Test Da | ta | | | · | | | | l | | · | | | |
| ¹¹ Date New Oil | | M Gas D | edivery Date " Test | | st Date | Date | | ngth | H Thg. Pressure | | 2º Cag. Pressure | | | |
| " Choke Size | | 41 | 4 Oil 4 Wi | | Water | aler | | <u></u> | " AOF | | 4 Test Method | | | |
| 4 I hereby certification with and that the knowledge and I | e jaformation | les of the Oil o | Conservation Di | vision have been lete to the best | of my | | OI | L CON | NSERVATI | ON DI | VISI | NC | | |
| Signature: | Vaces | lont | min | chro | u/ | Approved | l by: | 48 2 1 5 | | ا او ۲۱۱۹ مارد | TON | | | |
| Printed nume: Gaylon Thompson | | | | | | | Title: | | | | | | | |
| Tide: Engineering Operations Secretary | | | | | | | Approval Date: | | | | | | | |
| Date: | 9/20/9 | 94 | Phone: (| 903) 561 | -2900 | | | SEP- | 2 (1994 - | | | | | |
| " If this is a cl | hange of ope | rator fill in th | e OGRID nun | ber and name | of the prev | dous operat | or | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | Previous C | perator Sign | ature | | | D. 1 | - : - N | | <u> </u> | | . | | | |
| | | Serves premi | • | | | male | d Name | | | Title | | Date | | |