District I

1625 N. French Dr., Hobbs, NM 88240

District H

811 South First, Artesia, NM 88210

State of New Mexico Energy, Minerals & Natural Resources

Form C-104 Revised March 25, 1999

OIL CONSERVATION DIVISION

Submit to Appropriate District Office

District III	13 1 . 1 . 1	NA 107 440	2040 South Pacheco									5 Cop	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV			Santa Fe, NM 87505							Г	٦	•	
2040 South Pac										L		ENDED REPOI	
<u> </u>	R					D AU	THORIZ	ZATIC	N TO TRA	NSPC	<u>ORT</u>		
Operator name and Address MAYNARD OIL COMPANY										² OGRID Number			
8080 N CENTRAL EXPRESSWAY #660									33016 Reason for Filing Code				
DALLAS, TX 75206									CH EFFECTIVE 11/4/99				
API Number 30 - 025-25387						⁵ Pool Nai				⁶ Pool Cade			
	roperty Code		CORBIN QUE							13280			
	7 +9615		* Property Name STATE 35						* Well Number 004				
II. 10	Surface I	<u>_ocation</u>											
Ut or lot no.	Section 35	Township 17S	Range Lot.ldn 33E		Feet from 1750	n the	North/South L S		Feet from the 330	East/West line W		County LEA	
11	Bottom I	Iole Locat	ion		*	#-#-							
UL, or lot no.	Section	Township	Range	Lot Idn	Feet fro	m the	North/South lin		Feet from the	East/West line		County	
		ng Method Code P			e 15 (¹⁵ C-129 Permit Nu		nber ¹⁶ C-129 Effec		e Date		129 Expiration Date	
		ransporters											
" Transporter OGRID		7 Transporter Name and Address				¹⁶ POD ²¹ O/G			12 POD ULSTR Location				
009171		GPM GAS CORP., 4044 PENBROOK				2544730 G				and	Descriptio	11	
A COLUMN	220	On	ESSA, TX	79762		(817)							
21778		SUNOCO, INC., 1004 N BIG SPRING #575				2544710 O							
		MIDLAND, TX 79701											
					1000	and advantage	1.22.22.22.22.1						
							Market State						
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V. Produ	ced Wate	er			130.00	برأي والمدائد المربعولية	and we realize he de la	to the second of the second	· · · · · · · · · · · · · · · · · · ·				
	POD					¹¹ POD U	LSTR Location	on and De	escription				
2544750													
V. Well C	<u>'ompletic</u>	on Data	-				****		· · · · · · · · · · · · · · · · · · ·				
18 Spud	l Date	16 Ready Date			¹⁷ TD			'BTD '' Perforat		tions	lons DHC, MC		
	11 Hole Size	³¹ Carlon 6. Talking											
· · · · · · · · · · · · · · · · · · ·			³¹ Casing & Tubing Size			" Depth Set					¹⁴ Sacks	Cement	
	·												
									_ 				
/I. Well T	Test Data								l				
15 Date New Oil		36 Gas Delivery Date		37 Test	37 Test Date		38 Test Length		39 Tbg. Pressure			⁴⁰ Csg. Pressure	
" Choke	Size	⁴ O	² Oil ⁴³ Wate		ater	44 Gas		4 AOF		1	46 Test Method		
" I hereby ceror with and that the knowledge and I Signature:	information g belief.//	s of the Oil Conse given above is tru MALCA	e and comp فمس	rision have been collete to the best of t	omplied my	Approve		L COI	NSERVAT	ION D)IVISI	ON	
Printed name: C			001	·		Title:			Orie, Sie	ned by	<i>-</i>		
Printed name: CASSONDRA FOSTER								Orig. Signed by Paul Kautz					
File: MANAGER LAND AND MARKETING						Approval Date:							
Date: 11/13/99			Phone: 214										
" If this is a ch	unge of operat	tor fill in the OG	RID numb	er and name of th	e previous	operator	1011 000						
	Previous On	perator Signatur		R EXPLORACIO	UN AND I			ANY	023846				
		~-6mm(d)	YY	Xd/	1		d Name ORDLOH		PRI	Tit ESIDENT	te `AND CE	Date O 11/1/2/00	

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 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 1, 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.

- 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.
- 3.

Reason for Illing code from the following table:

NW New Wall

IIC Recompletion

CH Change of Operator

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AO Add gas transporter

CO Change gas transporter

The Request for test allowable (include volume requested)

If for any other reason write that reason in this box.

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 Б.
- The pool code for this pool €.
- 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 jot no.' box. Otherwise use the OCD unit letter. 10.
- The bottom hole location of this completion 11.
- Lease code from the following table: 12.

6 P

Federal State Fee Jicarilla

Navajo Uta Mountain Uta Other Indian Triba

- The producing method code from the following table: 13. Pumping or other artificial lift
- 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 16.
- MO/DA/YR of the C-128 approval for this completion 16.
- MO/DA/YR 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 19.
- 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. Oll Ges
- The ULBTR 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 24.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 20. المعجد عجاد المحاصط التداد

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 produced
- MO/DA/YR that gas was first produced into a pipeline 35
- MO/DA/YR that the following test was completed 38.
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Bhut-in tubing pressure gas wells aв.
- Flowing easing pressure oil wells Shut-in casing pressure gas wells 39.
- Diameter of the choke used in the test 40.
- Barrals of oil produced during the tool 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: 45. The method used to test the stand
 F Flowing
 P Pumping
 S Swabbing
 II 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 48.
- The previous operator's name, the rignature, 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.