District II

PO Box 1980, Hobbs, NM 88241-1980

PO Drawer DD, Artesia, NM 88211-0719

State of New Mexico ierals & Natural Resources Department Energy

Form C-104 Revised October 18, 1994

Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION 2040 South Pacheco

strict III 00 Rio Brazos Rd	I., Aztec, NM	87410	2040 South Pacheco Santa Fe, NM 87505							5 Copie				
strict IV 40 South Pacheco	o, Santa Fe	M 87505									AMEN	DED REPOR		
•	P	EQUEST	FOR A	LLOWAB	LE A	ND AU	J THO I	RIZAT	ION TO T	RANSI	PORT			
		¹ Opera	tor name ar	d Address					2 (OGRID N	umber			
BURLINGTON RESOURCES OIL AND GAS COMPANY											26485			
P. O. BOX 51810											eason for Filing Code			
MIDLAND, TEXAS 79710-1810 4 API Number 25 448							5 Pool Name				ITIZED - CHGE . PROP . NAME 6 Pool Code			
			WEST CORBIN DELAWARE POOL					13195						
7 Property Code 018359 24 200				WE:		roperty N					9 Well Number			
				CORE		EDERAL DELAWARE UNIT					4 WIW			
		Location	· · · · · ·											
JL or lot no.	Section	Township	Range	Lot. Idn	Feet from	n the	North/South Line		Feet from the	East/West line		County		
_ J	18	185	33E		23	10	NO	RTH	2310	EA	ST	LEA		
11	Bottom	Hole Loc	ation											
JL or lot no.	Section	Township	Range	Lot. Idn	Feet fro	m the	the North/South Line		Feet from the	East/W	est line	County		
Lse Code	13 Produc	ing Method Cod	le 14 Gas	Connection Date	15 C	-129 Per	mit Numb	er ¹	6 C-129 Effective	Date	¹⁷ C-1	29 Expiration Date		
		ransporte	rs											
18 Transporter OGRID		19 Transporter Name and Address				20 POD 21 O/G			22 POD ULSTR Location and Description					
								_	1					
		<u> </u>		<u> </u>										
														
V. Produ	rood Wa	tor												
²³ PO		itei			24]	POD ULS	STR Locat	ion and De	scription					
V. Well (Complet	ion Data			- -	 .	<u></u>							
²⁵ Spud Date		²⁶ Ready Date		²⁷ TD		²⁸ PBTD		²⁹ Perforations ³⁰ DHC, DC		DHC, DC, MC				
31 F	lole Size	REMA		ı		•			·	~	.	1 44		
Unitization effective 1											Corbin Federal #4			
Unit Agreement No. 100723X						Lse. #NM93 Reclassed from SWD to WIW under —								
						Case No. 12047								
		_							o. R-11099	approv	ved 12	-9-98.		
VI. Well	Test Da	 ta												
35 Date New Oil		36 Gas Delivery Date		37 Test Date		38	38 Test Length		³⁹ Tbg. Press	ure 40 Csg. Pr		Csg. Pressure		
41 Choke Size		⁴² Oil		43 Water	43 Water		44 Gas		⁴⁵ AOF		46	Test Method		
⁴⁷ I hereby cer	tify that the	rules of the Oil	Conservation	on Division have true and complete	been			OIL C	ONSERVATION	ON DIV	ISION			
complied with a the best of my l Signature:			e Per	2	- 19	Approve	d by:	· Nigr - Oc	5 55 124 OH	DIS 1971	LIANE			
Printed name:				-		Title:				·				
Title: REGULATORY REPRESENTATIVE						Approva	l Date:		:					
D-4	8-99		Phone: 9	15-688-6906	; <u> </u>									
		perator fill in the		imber and name		vious ope	erator							
		revious Operato					inted Nam			Ti	itle	Date		
	P	revious Oberato	· nightermie			• •								

New Mexico Oil Conservation Divisio C-104 Instructions

IF THIS IS AN AMENDED REPORT. CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT.

Report all gas volumes at 15.025 PSIA at 60 degrees 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.

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

- 1 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. 2.
- Reason for filing code from the following table: NW New Well RC Recompletion 3

RC CH AO CO

Change of Operator (Include the effective date.)
Add oil/condensate transporter
Change oil/condensate transporter

AG CG RT

Change oil/ concensate transporter
Add gas transporter
Change Gas transporter
Request for test allowable (include volume requested)

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

- The API number of this well
- 5. The name of the pool for this completion
- 6 The pool code for this pool
- The property code for this completion
- 8. The property name (well name) for this completion
- The well number for this completion
- The surface location of this completion NOTE: If the number United States government survey designates a Loc Number for this location use that number in the 'UL or lot no. box. Otherwise use the OCD unit letter. 10
- 11. The bottom hole location of this completion
- 12 Lease code from the following table:
 - Federal State
 - SP
 - Fee Jicarilla
 - J
 - Navajo Ute Mountain Ute Other Indian Tribe
- The producing method from the following table: F Flowing 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 15
- 16. MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this 17 completion
- 18 The gas or oil transporter's OGRID number
- 19 Name and address of 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. 20
- Product code from the following table: 21
 - Ö
 - Oil Gas
- 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.) 22
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and the POD has no number the district office will assign a number and 23. write it here
- The USLTR location of this POD if is is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water 24. (Example: Tank", etc.)
- 25 MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26
- 27 Total vertical depth of the well
- 28 Plugback vertical depth
- 29 Top and bottom perforation in this completion or casing

- Write in DHC' if this completion is downhole commingled with another completion, DC' if this completion is one of two non-commingled completions in this well bore, or MC if there are more than three non-commingled completions in this well bore.
- Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- 33 Depth of casing and tubing. If a casing liner show top and
- 34 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.

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

 - P Pumping
 S Swabbing
 If other method please write it in.
- 47. 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 thisreport.
- 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. 48. and the date this report wassigned by that person.