District I PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994 Instructions on back

District II

PO Drawer DD, Artesia, NM 88211-0719 District HI			OID CONSERVATION DIVISION						Submit to Appropriate District Office				
1000 Rio Brazos Rd., Aztec, NM 87410			PO Box 2088 Santa Fe, NM 87504-2088						5 Copies				
District IV FO Box 2088, S	anta Fe, NA	M 87504-2088			•						] AME	ENDED REPORT	
I.						ID AU	THORI	ZATI	ON TO TR				
	FLK O	IL COM	-	me and Addres	•				007147	' OGRI	D Numb	REF	
	Post O	ffice Bo	x 310		' Reason for Flling Code								
	Roswe	ll, New I	Mexico 88202-0310						CH Effective 04/01/96				
. 4	P1 Number	·	Pool Name						• Pool Code				
<b>30 - 0</b> <i>25-26410</i>			Airstrip I				Bone Spring			00960			
Property Code			<sup>1</sup> Propert				erty Name			' Well Number			
II. 10 Surface Locatio			State FU							2			
II. 10 S						n the	North/Sou	th Line	Feet from the	East/W	cet line	County	
N	N 25 18S		34E		960	)		uth	1980	We:		İ	
ii Bottom Hole Loc				I	1 000	<u></u>	1 50	uci i	1000	1,700		Deu	
UL or lot no.			· ·	Lot Ida	Feet from		North/So		Feet from the	East/West fine		County	
N	25	18S	34E	<u> </u>	960		Sot	_,	1980	We.		Lea	
12 Lee Code	1º Produc	ding Method (	Code 14 Gas	Connection Da	ite 1º C	:-129 Perm	it Number	1	C-129 Effective	Unte	" C-	129 Expiration Date	
III. Oil and Gas Transporters													
Transporter			Transporter	" PO	D	<sup>21</sup> POD ULSTR Location							
OGRID		<del></del>	and Address					21 O/G	<del></del>		)escriptio		
024650 Warre		Warren	Petroleum Corp.			13668	1366830 G						
I Mark and the transfer of the National States of			Oklahoma 74102										
12852 Koch Se			rvice Inc.			13668	366810 O						
P.O. Bo. Wichita		P.O. Box	· · · · · · · · · · · · · · · · · · ·			e Nathael Interes							
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IV. Prod	POD POD	ater	<del></del>	<del></del>		M			··				
<b>'</b>	100					^ POD U	LSTR Local	ion and i	Description				
V. Well	Comple	etion Dat	a	· · · · · · · · · · · · · · · · · · ·	<del></del> -				<del></del>				
18 Spud Date			<sup>14</sup> Ready 1	" TD	"TD "TBTD				" Perforations				
<sup>14</sup> Hole Size		31 Casing & Tubing Size				<sup>31</sup> Depth Set			<sup>30</sup> Sacks Cement				
										<del></del>			
L.,		<del> </del>											
VI. Well									·······	:			
Date New Oil * G		" Gas	Delivery Date "Test Date		est Date	<sup>27</sup> Test Length		M Thg. Pressure			" Ceg. Pressure		
44 Choke Size			"Oil "Water		Watan	a Gas			·				
			Vinit				(,as		4 AOF			4 Test Method	
" I hereby cert	ify that the	rules of the Oi	1 Conservation	Division have be	en complied		<del></del>						
knowledge and	belief.	on given above ELK OIL	is true and con	iplete to the being $NY$	it of my		OI	L CO	NSERVAT.	ION I	JAKAR P	RON	
Signature:						Approved by:				r san 1908			
Printed name:	Josep	h L.Kel	ly			Title:	Title:						
Title:	Pres	sident			Approv	Approval Date:							
Date: 03	3/27/96		Phone:										
			the OGRID no										
ARROW		Operator Sig		1005 CON	igress,			- AUST	TIN, TEXAS	7870	1		
	Tak	Ulsti	Edsi	<u>l</u>	JAMES	H. EI	ed Name OSEL		PRESIDE		ille	4/1/96	

## 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 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

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

  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. 3.

- 4. The API number of this well
- 5. The name of the pool for this completion
- 6. The pool code for this pool
- 7. The property code for this completion
- The property name (well name) for this completion 8.
- 9. 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. 10.
- 11. The bottom hole location of this completion
- Lease code from the following table:
  F Federal
  S State
  P Fee
  J Jicarilla
  N Navajo
  U Ute Mountain Ute
  Other Indian Tribe 12.
- 13. The producing method code from the following table:

  F Flowing
  Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a 14.
- 15. The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR of the expiration of C-129 approval for this 17.
- 18. The gas or oil transporter's OGRID number
- 19. 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. 20. 21.
- Product code from the following table: Oil Gas G

- T' e ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Exemple: "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 sesign a number and write it here. 23.
- 24. 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.)
- 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
- 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
- 32. Depth of casing and tubing. If a casing liner show top and bottom.
- 33. Number of eacks 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 34.
- 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.
- Diameter of the choke used in the test 40.
- 41. Barrels of oil produced during the test
- 42. Barrels of water produced during the test
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D
- The method used to test the well: 45. F Flowing
  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.

2

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