District I PO Bax 1980, Hobbs, NM 88241 District II 811 South First, Artesia, NM 882						Form C-16 Revised October 18, 19 Instructions on ba					
District III 1000 Rio Brazos Rd., Astec, NM		OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505					20	Submit to Appropriate District Offi 5 Copi			
District IV 2040 South Pacheco, Santa Fe, N	M 87505			•, -						NDED REPOR	
	UEST			LE AN	ID AU	THORIZA	TION TO 1				
Operator name and Address								¹ OGRID Number 000415			
BASIN AlliANCE, LLC									1.5 a for Filing Code		
PO Box 1378 Hobbs NM 8824	1				Sale of 379 bbls skim oil						
* API Number	-	* Pool Name						Month of Nov, 2001			
30 - 025-28083		SWD; Devonian						96101			
' Property Code		* Property Name State AJ						* Well Number			
II. ¹⁰ Surface Loc	ation		J		1						
	mship	Range	Lot.Ida	Feet from	the	North/South Li	ae Feet from the	East/W	Vest line	County	
<u> </u>		36E2:)	N	2310	10 E		025	
¹¹ Bottom Hole Loc UL or lot no. Section Township								Dan darman I ar and			
	- and p	Raage	Lot ida	Feet from	n ree	North/South in	Feet from the	East/W	est line	County	
¹² Lse Code ¹³ Producing Me	thod Code	⁴ Gas (Connection Date	^u C	-129 Perm	tt Number	" C-129 Effectiv	e Detc	" C-1	129 Expiration Date	
III. Oil and Gas Tra		 rs	·								
"Transporter "Transporter Name "POD "O/G "									POD ULSTR Location		
OGRID		skaz. O	s Ifield Som					and	Descriptio	a	
	Box 5				2808	474 0					
		1 88:			8.3		×		·		
037008 JENEX OPERATING CO 2808474 0 P.O. Box 308											
Hobbs, NM 88241							20 24	1331			
					Mr 2002						
					E to the						
IV Produced Water											
POD POD	IV. Produced Water * POD ULSTR Location and Description										
V. Well Completion									·		
¹¹ Spud Date	³⁶ Rea	dy Date		" TD		* PBTD	** Perío	rations	,	DHC, DC.MC	
Ji Hole Size		³³ Casing & Tubing Size				²³ Depth	Set	sacks Cement			
VI. Well Test Data											
³⁸ Date New Oil ³⁴ Gas D		velivery Date ³⁷ Test Date			²⁶ Test Length		· " Tog.	" Tog. Pressure		" Cag. Pressure	
⁴¹ Choke Size		u Oil ^u Water			44 Ges			AOF .		** Test Method	
								1			
⁴⁷ I hereby certify that the rules of i with and that the information given	above is tri	servation Div ie and comp	vision have been of lete to the best of	complied my		OILC	ONSERVAT	ΠΟΝ Γ		ON	
knowledge and belief Signature:	0 0				Approved						
Anaeg	exel	<u>۲</u>			Approved by: ORIGINAL SIGNED BY						
Hugo K		jele Jr.				Tile: GARY W. WINK OC FIELD REPRESENTATIVE II/STAFF MAN					
Dave: Vice Presiden		+ 			Approval Date: FEB 0 5 2002						
- If this is a change of operator	611 54 454		05-397-5		<u> </u>						
		JUNIU BW	NUTE ADG BADE (vi ine pre	AIONS ODGES	wor					
Previous Operat	or Signatu	rt			Printe	d Name		T	it je	Date	

4. ...

IF THIS IS AN AMENDED REPORT, CHEL. 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 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 3.

 - Reason for filing code from the following table: NW New Well RC Recompletion CH Change of Operator (Include the effective date.) 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.
- 4 The API number of this well
- Б. The name of the pool for this completion
- 6. The pool code for this pool
- 7. The property code for this completion
- 8. The property name (well name) for this completion
- 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. If the
- 11 The bottom hole location of this completion
 - Lease code from the following table:
 - Federal State Fee Jicarilla SP

12.

- NU
- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: F Flowing P Pumping or other artificial lift 13.
- 14.
- MO/DA/YR that this completion was first connected to a gas transporte 15.
- The permit number from the District approved C-129 for this completion 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.
- 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: O Oil G 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 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 Tank", "Jones CPD Water 24.
- 25. MO/DA/YR drilling commenced 26.
- MO/DA/YR this completion was ready to produce 27.
- Total vertical depth of the well 28.
- Plugback vertical depth 29.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 30.
 - 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.

- 31. 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 bottom 34
- Number of sacks of cement used per casing string

If 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.

- 35. MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 36.
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- 40. Howing casing pressure - oil wells 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 Pumping Swabbin
 - 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 47.
- 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 48.

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