District 1 PO Box 1980, Hobbs, NM 88341-1980

State of New Mexico
Recrys, Minerals & Natural Resources Departs

Form C-1 Revised October 18, 19

Instructions on ba

District II \$11 South First, Artesia, NM \$2210 OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505 District III

Submit to Appropriate District Off 5 Cop

1000 Rio Brazos Rd., Astec, NM 87410 District IV

2040 South Pac							mron.	*C* 4 C**	10) 1 ma m		MENDED REPO	
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BASIN Alliance, LLC									000415			
PO Box 1378 Hobbs NM 88241							Sale of 7					
	API Number					Pool Nam			<u>lMonth of</u>	Oct. :	Pool Code	
30 - Q 25-28083 SWD; Devonian										96101		
' P	roperty Cod	e	Property Name					° Well Number				
II. ¹⁰		Location	2£	State AJ						1		
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11 Bottom Hole Lo												
UL or lot no.	Section	Township	Range	Lot Ida	Feet Iron	m the	he North/South line		Feet from the	East/West h	ine County	
12 Lee Code	13 Produc	ing Method (Code H Gas	Connection Date	ıı C	-129 Perm	ılt Number		C-129 Effective	Date 1	⁷ C-129 Expiration Da	
III. Oil a	nd Gas	Transpo	rters						· · · · · · · · · · · · · · · · · · ·			
Transporter OGRID			" Transporter Name and Address				D	H O/G	²² POD ULSTR Location			
012421 Ke		Elly Maclaskey Oilfield Sor.				2808474 0			and Descr	iption		
P. O. 80)												
037008 JENEX OPERATING CO					0.0001244							
P.O. Box 308 Hobbs, NM 88241						2808474 0						
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V. Prodi		ater				mark street	Section 1	e generalise	E	×.		
- D	POD					POD UL	STR Local	ion and I	Pescription			
V. Well (Complet	ion Data							· · · · · · · · · · · · · · · · · · ·			
	Date		Ready Date		" TD	 -	* PB1	nD	» Perfora	tions	* DHC, DC,MC	
										1		
31 Hole Size			" C		n	Depth Se		м	Sacks Cement			
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I. Well	Test Da	ita	-1		-						· · · · · · · · · · · · · · · · · · ·	
Date New Oil Ga		* Gas D	Delivery Date Test		Date		Test Length		" Tog. Pr	- STREET	4 Cag. Pressure	
4 Choke Size			4 Oil 4 Wat		ler				* AO	4 AOF		
" I hereby certif	y that the ru information	les of the Oil	Conservation Di	vision have been of	complied		יזס		NSERVATI	ON DUT	ICION	
knowledge <mark>and l</mark> Signature:	oelief	n	n		•	Annone				אות אוס	IOION	
Printed name:						Approved by: ORIGINAL SIGNED BY TILLE: GARY W. WINK						
Title: Hugo NAE			gele Jr.			Appropriate	OC FIELD REPRESENTATIVE				E 2002	
Date: Vice Preside			Phone: 505-397-5989			- 471042	Approval Date: FEB 0 5 2002					
	hange of op	erator fill in		mber and name (vious opera	tor					
	Previous (Operator Sign	ature	· · · · · · · · · · · · · · · · · · ·		Bul-1-	d Name			TVIA		
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New Maxico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHEC. THE BO "AMENDED REPORT" AT THE TOP OF THIS DOCUMEN HE BOX LABLED

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.
- 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. 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
- 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.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table: Federal State Fee Jicarilla S Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: 13. Flowing
 Pumping or other artificial lift
- 14. MO/DA/YR that this completion was first connected to a 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.
- 18. The gas or oil transporter's OGRID number
- 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.
- 21. Product code from the following table: Oil Gas
- The ULSTR location of this POD If it is different from 22. well completion location and a short description of the POD (Example: "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 her two 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", etc.) 24
- MO/DA/YR drilling commenced 25.
- 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 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 dianieter 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.
- 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.

- MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 36.
- MO/DA/YR that the following test was completed 37.
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- 40 Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- 41. Diameter of the choke used in the test
- Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 45.
- 46. The method used to test the well:

 F Flowing
 P 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 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.