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

State of New Mexico

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office

PO Drawer DD, Artesia, NM 88211-0719

District III

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

1000 Rio Brazo	Rd., Aztec	, NM 87410		PO Box 2088 Santa Fe, NM 87504-2088							5 Copies			
District IV PO Box 2008, S	Santa Fc. NA	A 87504-2088	ì	24144	- 0, 1	111 0750	+ 2000	,			AME	NDED REPOR		
I.				LLOWA	BLE A	AND AU	JTHOI	RIZAT	ION TO T	RANSP	ORT			
_			Operator a	ame and Addres	4			· · · · · · · · · · · · · · · · · · ·		¹ OGRI				
Arrow Exploration Company c/o Oil Reports & Gas Services, Inc.											144229			
Post Of	fice B	cs & Ga ox 755	s servic	ces, Inc.							Reason for Filing Code			
Hobbs,	New Me:		241				cc				Effective 11/01/95			
30 - 025-	Number		Pool Name							Pool Code				
	operty Code		Airstrip Bone Spr					ng	00960			0		
			Property Name							' Well Number				
II. 016981 Ourface Location			State HQ							004				
Ul or lot no.	Section	Township	Range	Lot.Idn	Feet f	et from the North		outh Line	Ford form all a	T ./10 . 11 . 1				
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UL or lot no.		Township		Lot Idn	Feet f	from the	North (S	South line	F 46	T=				
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12 Lee Code	13 Produci	ng Method C	ode 14 Gau	Connection Dat		6 C-129 Perm	SOUTH		C-129 Effective	<u> </u>		LEA		
s		P	j	UNKNOWN					CALL ENICOUVE I	Date	- C-12	9 Expiration Date		
II. Oil a	nd Gas	Transpo	rters											
Transpor		1	20 PO	D	²¹ O/G	22 POD ULSTR Location								
OGRID 138648		and Address									scription			
138648	Am	Amoco PL ITD (Trucks)				136651	LO	0						
024650	1	Warren Petroleum Corp.				136653	1366530 G				· · · · · · · · · · · · · · · · · · ·	·		
	/7.2. NE	P. O. Box 1589 Tulsa, OK 74102				1300330 G								
4	14	ISA, UK	. 74102											
to extension to a	Managara .													
				4.4 Table 1.0 Ta										

V. Produ	iced Wa	to=												
	POD					# pop 17								
136655						¹ POD UL	SIK Loca	tion and D	escription					
. Well (Complet	ion Data												
¹¹ Spu	d Date	Julia	¹⁴ Ready D	ate	" TD			22 PBTD 22 Perforations						
			•	,			10		~ гыр		29 Perforations			
	* Hole Size		31	Casing & Tubing	Size	" Depth Set			³³ Sacks Cement			Co		
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'I Well'	Test Da	ta		· · · · · · · · · · · · · · · · · · ·										
VI. Well Test Data H Date New Oil H Gas Delivery Date H Test Date							27 T 1		W 475					
			-a.c., Date	, sat bite		37 Test Leng		ngth	³ Tbg. Pre	asu re	³⁹ Cag. Pressure			
" Choke	Size	4	ı Oil	4 W	ater	4 Gas				F 44.77				
				Water		Gas			4 AO	•	4 Test Method			
I hereby certif	y that the rul	es of the Oil	Conservation D	ivision have been	complie	xd [<u></u>			
with and that the knowledge and b	unformation relief	given above	is true and com	plete to the best of	of my		OI	L CON	NSERVATI	ON DI	VISIO	NC		
Signature:	10		Heller	44 44	\checkmark	Approved	l by: 🤼	Wei		19.0	MOT			
Signature: Holland JH														
Laren Holler							Title:							
Agent						Approval	Approval Date:				NOV 09 1995			
	07/95			05) 393-2										
" II this is a ch	ange of ope	rator fill in ti	he OGRID nu	mber and name	of the pr	evious operat	or							
	Presions 0	perator Sign	911129											
	2.2	Larami nifit				Printe	d Name			Title		Date		

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 completion.

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

- 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

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add ges transporter

CG Change gas transporter

RT Request for test allowable (include volume requested) request for test ellowable (include vo requested)

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

- 4 The API number of this well
- 5. The name of the pool for this completion
- 8. 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
- The bottom hole location of this completion 11
- 12 Lease code from the following table:
 Frederal
 State
 Frederal
 Itematical

Jicarilla

Ň

Navajo Ute Mountain Ute Other Indian Tribe

- 13. The producing method code from the following table: Flowing Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a 14.
- 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
- 17. MO/DA/YR of the expiration of C-129 approval for this
- The gas or oil transporter's OGRID number 18.
- 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:
 O Oil
 G Gas 21

- T! e ULSTR location of this POO if it is different from the well completion location and a short description of the POO (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 sesign 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 POO (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 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, inside diameter of the well bore
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and bottom. 32.
- 33. 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
- MO/DA/YR that gas was first produced into a pipeline 36.
- 36. MO/DA/YR that the following test was completed
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- 39. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- 40. Diameter of the choke used in the test
- 41. Barrels of oil produced during the test
- Barrele of water produced during the test
- MCF of gas produced during the test 43
- Gas well calculated absolute open flow in MCF/D 44.
- 45. The method used to test the well: Flowing
 Pumping
 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.