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

State of New Mexico
_nergy, Minerals & Natural Resources Department

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

5 Copies

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	OGRID Number												
Post Office Box 310 Roswell, New Mexico 88202-0310									O07147 Reason for Filing Code				
		Roswell, I	lew me.	XICO 00202	2-0310			1	СН		_	4/01/96	
30 - 0 25-	Pool Name				1 Pool Code								
	28035 operty Code		Airstrip Bone Spring Property Name						00960 * Well Number				
	882		State NM								' We	M Number 1	
		Location				tute 11.	171	*************************************				1	
Ul or lot no.	Section	Township	Range	Lot.idn	Feet from	ı the	North/Sou	uth Line	Feet from the	East/We	est line	County	
B 11 T	35	18S	34E		672		No	rth	1980	Eas	it	Lea	
UL or lot no.		Hole Loca	Range	Lot Ida	Feet from		N- 14 Ca	45. 11		7 			
B	35	185	34E	LOUIGE	672		North/So No	outh line orth	Feet from the 1980	East/West line East Date 17 C-		County Lea	
11 Lee Code		ing Method Code		Connection Date	<u></u>	C-129 Permi			C-129 Effective 1			29 Expiration Date	
II. Oil au	nd Gas	<i>/</i> Transporte	<u> </u>			······································		<u></u> .			-		
Transpor OGRID	rler	1º Transporter Name and Address				" POD " C		n O/G	,	²² POD ULSTR Location and Description			
13864			Amoco Pipeline ITD			1324410		0			The state of the s	· · · · · · · · · · · · · · · · · · ·	
	224 No. 100 and 1		2 North West Avenue										
02465			elland, Texas 79336 ren Petroleum Corp.				1324430						
02405	skop od od	P.O. Box 1589 Tulsa, Oklahoma 74102				102	30	() () () () () () () () () ()					
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IV. Prod		ater			Parece	and a more	. 00000		L				
15	POD					M POD UI	SIR Local	tion and I	Jescription				
V. Well	Comple	etion Data					-						
	pud Date	Hon Dum	24 Ready D)ate		" TD			" PBID			Perforations	
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	11 Ilole Size	ė	11 Casing & Tubing Siz		ig Size			Depth Se	1		²⁰ Sacki	s Cement	
													
				·									
*** 337.11							· · · · · · · · · · · · · · · · · · ·					·	
VI. Well Bate N	Test Da		duan Data										
. -	IEW OR	[™] Gas Delivery Date [™] Te			est Date		n Test Len		" Tbg. Pi	ressure		" Ceg. Pressure	
" Choke Size		41 (41 Oll 42 Wate		Nater	⁴³ Gas		<u> </u>	" AOF			" Test Method	
" I hereby cert	tify that the r	rules of the Oil C	il Conservation Division have been complied			1							
with and that th	he informatio	on given above is	true and con	noicte to the best	of my		OI	L CO	NSERVAT	ION [DIVISI	ON	
Signature:		DY OUT C	OMFAI	11		Approve							
Printed name:	Jose	ph J. Kell	ν			Approved by: ORIGINAL SECTION FOR EDITION Title: DEFENDED TO A FORM SECTION							
Title:		resident	y			Approval Date:							
Date: 03/	/27/96	Cotacito	Phone:	(505)623-3									
" If this is a	change of op	perator fill in the	e OGRID nu	umber and name	e of the pres	vious operi	ntur OGF	≀1D# 1	44229				
ARROW E	EXPLORA'	TION COMP	PANY -	1005 Cong	gress,	Suite	880 -	- Aust	tin, Texas	7870	1	<u></u>	
	1 revious	Operator Signat	H. E	dsel	/ Jam	Printes H.	ed Name Edsel			Pres	ille ident	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 completion.

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

- 1. Operator's name and address
- 2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- 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 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
- 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.

- The producing method code from the following table:

 F Flowing
 Pumping or other artificial lift 13.
- 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:

 O Oil
 G Gas

- T' e 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.)
- 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", etc.) 24.
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 28.
- 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
- Outside diameter of the casing and tubing 31.
- 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 wall it must be from a test conducted only after the total volume of load oil is recovered.

- 34. MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline 35.
- 36. MO/DA/YR that the following test was completed
- 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.
- 40. Diameter of the choke used in the test
- 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
- 45 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 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.

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417 1996 Received. Hobbs OCD