

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources Department

**OIL CONSERVATION DIVISION**  
**2040 South Pacheco**  
**Santa Fe, NM 87505**

Form C-104  
Revised October 18, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

☐ AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address BURLINGTON RESOURCES OIL AND GAS COMPANY P. O. BOX 51810 MIDLAND, TEXAS 79710-1810		<sup>2</sup> OGRID Number 26485
		<sup>3</sup> Reason for Filing Code UNITIZED-CHGE. PROP. NAME
<sup>4</sup> API Number 30-0 30-025-30727	<sup>5</sup> Pool Name WEST CORBIN DELAWARE POOL	<sup>6</sup> Pool Code 13195
<sup>7</sup> Property Code <del>018359</del> 24200	<sup>8</sup> Property Name CORBIN FEDERAL DELAWARE UNIT	<sup>9</sup> Well Number 17

**II. <sup>10</sup> Surface Location**

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
C	18	18S	33E		660	NORTH	1980	WEST	LEA

**<sup>11</sup> Bottom Hole Location**

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> POD	<sup>21</sup> O/G	<sup>22</sup> POD ULSTR Location and Description
022628	TEXAS-NEW MEXICO PIPELINE CO. P. O. BOX 730 HOBBS, NEW MEXICO 88241-0730	2328910	0	TANKS ARE LOCATED IN UL-H, SEC. 18, T18S, R33E, LEA CO., NM.
009171	GPM CORPORATION 4044 PENBROOK STREET ODESSA, TEXAS 79762	2330730	G	METER IS LOCATED IN UL-H, SEC. 18, T-18S, R33E, LEA CO., NM.

**IV. Produced Water**

<sup>23</sup> POD	<sup>24</sup> POD ULSTR Location and Description
2330759	UL-H, SEC. 18, T18S, R33E, LEA CO., NM - WATER TANKS AT BATTERY SITE LOCATION

**V. Well Completion Data**

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBSD	<sup>29</sup> Perforations	<sup>30</sup> DHC, DC, MC
<sup>31</sup> Hole Size	<sup>32</sup> Casing & Tubing Size	<sup>33</sup> Depth Set	<sup>34</sup> Sacks Cement		
<b>REMARKS:</b> Unitization effective 1-1-99 Unit Agreement No. 100723X Formerly: West Corbin Federal #17 Lse. #NM93					

**VI. Well Test Data**

<sup>35</sup> Date New Oil	<sup>36</sup> Gas Delivery Date	<sup>37</sup> Test Date	<sup>38</sup> Test Length	<sup>39</sup> Tbg. Pressure	<sup>40</sup> Csg. Pressure
<sup>41</sup> Choke Size	<sup>42</sup> Oil	<sup>43</sup> Water	<sup>44</sup> Gas	<sup>45</sup> AOF	<sup>46</sup> Test Method

<sup>47</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

MARIA L. PEREZ

Title:

REGULATORY REPRESENTATIVE

Date: 1-28-99

Phone: 915-688-6906

**OIL CONSERVATION DIVISION**

Approved by:

Title:

Approval Date:

<sup>48</sup> If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

New Mexico Oil Conservation Division  
C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT.

Report all gas volumes at 15.025 PSIA at 60 degrees.  
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 (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
- 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
- 10     The surface location of this completion. NOTE: If the number 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.
- 11     The bottom hole location of this completion
- 12     Lease code from the following table:  
F      Federal  
S      State  
P      Fee  
J      Jicarilla  
N      Navajo  
U      Ute Mountain Ute  
I      Other Indian Tribe
- 13     The producing method from the following table:  
F      Flowing  
P      Pumping or other artificial lift
- 14     MO/DA/YR that this completion was first connected to a gas transporter
- 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
- 17     MO/DA/YR of the expiration of C-129 approval for this completion
- 18     The gas or oil transporter's OGRID number
- 19     Name and address of transporter of the product
- 20     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.
- 21     Product code from the following table:  
O      Oil  
G      Gas
- 22     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.)
- 23     The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and the POD has no number the district office will assign a number and write it here.
- 24     The USLTR 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
- 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
- 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
- 36     MO/DA/YR that gas was first produced into a pipeline
- 37     MO/DA/YR that the following test was completed
- 38     Length in hours of the test
- 39     Flowing casing pressure - oil wells  
Shut-in casing pressure - gas wells
- 40     Flowing 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:  
F      Flowing  
P      Pumping  
S      Swabbing  
If other method please write it in.
- 47     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.
- 48     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.