

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
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
OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised March 25, 1999

Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address RALPH C. BRUTON 3500 ACROMA HOBBS, NM 88240		² OGRID Number 018687
		³ Reason for Filing Code CH EFFECTIVE 4-1-2000
⁴ API Number 30 - 025-31327	⁵ Pool Name GERONIMO;DELAWARE	⁶ Pool Code 27400
⁷ Property Code 009906 25610	⁸ Property Name ANDAWAY 25 FEDERAL	⁹ Well Number 1

II. ¹⁰ Surface Location

UL or lot no. P	Section 25	Township 19 S	Range 32 E	Lot Idn	Feet from the 660	North/South Line S	Feet from the 660	East/West line E	County LEA
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¹¹ 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
¹² Lse Code F	¹³ Producing Method Code P	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date 04-01-00	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
021778	SUN Refining & Market.	2240570	D	
005097	CONOCO, INC	2240530	G	

IV. Produced Water

²³ POD 2240550	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTB	²⁹ Perforations	³⁰ DHC, MC
³¹ Hole Size	³² Casing & Tubing Size	³³ Depth Set	³⁴ Sacks Cement		

VI. Well Test Data

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

⁴⁷ 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: *Ralph C. Bruton*

Printed name: RALPH C. BRUTON

Title: INDIVIDUAL

Date: 3/15/00

Phone: (505) 890-0366

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

APR 06 2000

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

20165 SAMSON RESOURCES COMPANY, TWO WEST SECOND ST. , TULSA, OK 74103

Previous Operator Signature

Printed Name

Title

Date

153/97



Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Aztec, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator SAMSON RESOURCES COMPANY	Well API No. 30-025-31327 <i>OK</i>
Address 2 W. 2nd Street, Tulsa, OK 74103	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator GRACE PETROLEUM CORP., 6501 N. Broadway, OKC, OK 73116-8298	

II. DESCRIPTION OF WELL AND LEASE

Lease Name ANDAWAY 25 FEDERAL	Well No. 1	Pool Name, Including Formation GERONIMO - DELAWARE	Kind of Lease State, Federal or Fee	Lease No. NM 12413
Location Unit Letter <u>P</u> : 660' Feet From The <u>S</u> Line and 660' Feet From The <u>E</u> Line Section 25 Township 19S Range 32E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
SUN REFINING & MARKETING Co. Inc. <i>SRM</i>	PO BOX 2880, DALLAS, TX 75221-2880
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) ¹⁹⁷⁰⁵
CONOCO <i>Inc</i>	10 DESTA DRIVE E., STE 550, MIDLAND, TX
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?
	YES MARCH 1992

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations 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.

Dennis Chandler
Signature
DENNIS CHANDLER SUPV OF OPERATIONS
Printed Name Title
4-21-93 918-583-1791
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 27 1993
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Grace Petroleum Corporation	Well API No. 30-025-31327
Address 6501 N. Broadway, Oklahoma City, OK 73116 (405) 840-6600	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>
1. Open of btm perfs (5490-98')	
2. Authorized casinghead gas sales	
3. New allowable w/additional perfs	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Andaway 25 Federal	Well No. 1	Pool Name, Including Formation Geronimo-Delaware	Kind of Lease State, Federal or Fee	Lease No. NM 12413
Location				
Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line				
Section 25 Township 19S Range 32E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Sun Refining & Marketing Co Inc (R&M)	Address (Give address to which approved copy of this form is to be sent) Box 2039, Tulsa, OK 74102 (800-688-7074)	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco Inc	Address (Give address to which approved copy of this form is to be sent) Maljamar Plant, Maljamar, NM (505) 676-2961	
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 25
	Twp. 19S	Rge. 32E
	Is gas actually connected? Yes	When? 3/9/92

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	
Date Spudded 8/3/91	Date Compl. Ready to Prod. 2/1/92		Total Depth 7920'		P.B.T.D. 5510'			
Elevations (DF, RKB, RT, GR, etc.) GL 3581.1' KB 3596.3'	Name of Producing Formation Delaware		Top Oil/Gas Pay 5112'		Tubing Depth 5185' GL			
Perforations 5112-28', 5138-52', 5164-74' & 5490-98' (2 SPF)					Depth Casing Shoe 7946.4' GL			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8" 48# H-40		500'		450 sx lite to surface			
11"	8-5/8" 32#		4510'		2650 sx (20' from surface)			
7-7/8"	5-1/2" 17# N-80		7917.8		1100 sx (TOC @ 2400')			
2-7/8" EUE 8rd A,B,C			Pump @ 5108' Btm of tbg @ 5142'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank February 1, 1992	Date of Test March 11, 1992	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure 40 psi	Casing Pressure -	Choke Size N/A
Actual Prod. During Test same	Oil - Bbls. 79 bbls	Water - Bbls. 279 bbls	Gas- MCF 49 MCFPD

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations 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
Marvin T. Jordan Operations Superintendent
Printed Name
3/13/92 (405) 840-6624
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 23 1992
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
Title

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