District I

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION PO Box 2088

000 Rio Brazos istrict IV	Rd., Aztec,	NM 87410		Santa F	e, NM	87504	-2088			Г] ame	NDED REPOR	
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•				me and Address							D Numb	er	
Nodol and Common Production I I C											155615		
Nadel and Gussman Permian, L.L.C. 3200 First National Tower											Reason for Filing Code		
Tulsa, OK 74103-4313										CH 9/1/96 (name change)			
	PI Number				5 Pc	ool Name	e		· ·		, Ł	Pool Code	
30-0 25-31803 Geronimo Delaware											27400		
' Pr	operty Code		'Property Name State "HH" Delaware							' Well Number			
19	441		State	''ҢН'' Dela	ware							i [#] 2	
		Location	- T	1	T		I N 1 16.		Fra Commalia	I E. 407			
Ul or lot no.	Section	Township	Range	Lot.Idn	Feet from t			uth Line	Feet from the	East/West line		County	
A 11 .	36	198	32E		660		Nort	h	660	Eas	t	Lea	
		Hole Loc		1 - 1 - 1			1 31 11/2		T 7 . 6	I	est line		
UL or lot no.		Township	Range	Lot Idn	Feet from	the			Feet from the	1		County	
A 12 Lse Code	36	19S ng Method Co	32E	Connection Date	660	North 29 Permit Number			660 C-129 Effective	Eas		Lea 129 Expiration Date	
S	i	=	Gas	Connection Date	C-1	47 I Crui	nt Muniber		C-127 Effective	1/416		127 Expiration Date	
		nut-In Transpor i	tore								l		
II. Oil a				S ansporter Name			D	²¹ O/G	22 POD ULSTR Location				
OGRID			and A ldress						and Description				
01285.	2 K	OCH Oil	Company	•		25470	10	0					
	P	.O. Box	1200										
	H (obbs, NM	1 88241										
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		,											
									 				
IV. Prod	uced Wa	ater						****************				•	
	POD				24	POD UI	LSTR Loca	tion and l	Description				
V. Well	Comple	tion Data											
25 Spud Date			²⁰ Ready Date ²⁷ TD			²¹ PBTD			29 Perforations			³⁰ DHC, DC,MC	
												- u- · ·	
31 Hole Size			32 Casing & Tubing Size			33 Depth Set			et		[™] Sac	ks Cement	
						_							
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	 								i				
VI. Wel	l Test D	ata						,					
3 Date New Oil			Gas Delivery Date 37 Test D			ate 31 Test Length			31 Thg. Pressure			4 Csg. Pressure	
41 Choke Size		1	4 Oil 4 V		Water		44 Gas		45 AOF			** Test Method	
47 7	ale at a c	10/-521-2"	Contraction	Division have be-	on consolied			-			L		
" I hereby ce with and that	rury that the s the information	uics of the Oil of given above	is true and co	Division have been mplete to the best	of my	•	0	IL CC	NSERVAT	I MOIT	DIVIS	SION	
knowledge an	, ,	4/1//				Approv	ved by:						
Signature:	<i>{XAI</i>	11//9	man				vj.	Cri;	a. Signed b y .				
Printed name: Stephen J. Heyman							Geologist						
Title: Manager							Approval Date: NOV 0 5 1996						
Date:	10/24/9		Phone:	918/583-	3333					-			
			the OGRID 1	number and nau		vious ope	Tator	111					
33	3408		Nadel a	nd Gussma	n	V	MAKEN	本文	e			.0/24/96	
	Previous	Operator Sign	nature				nted Name	A 4 - 1 -			Title	Date	
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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
- 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 3.

NC RCH CO CA CA CRT

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
- 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
- Lease code from the following table:
 F Federal
 S State
 P Fee 12

Jicarilla

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Navajo Ute Mountain Ute Other Indian Tribe

- The producing method code from the following table:
 F Flowing
 P Pumping or other artificial lift 13.

- MO/DA/YR that this completion was first connected to a 14. gas transporte
- 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. completion
- 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

- 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.) 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 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
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- Plugback vertical depth 🚁 🛪 🐔 4 🖔 28.
- 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. 29.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 30.

- 31. Inside diameter of the well bore
- Outside diameter of the casing and tubing 32
- Depth of casing and tubing. If a casing liner show top and bottom. 33.
- 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
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41. Diameter of the choke used in the test
- Barrels of oil produced during the test 42.
- 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:

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 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.