<u>District I</u> 1625 N. French Dr., Hobbs, NAI 88240 District 11			State of New Mexico Energy, Minerals & Natural Resources						Form C-104 Revised March 25, 1999				
811 South First, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 District I <u>V</u>			OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505						Submit to Appropriate District Office 5 Copies AMENDED REPORT				
2040 South Pacl	icco, Santa Fo R I	NM 87505	FOR AL	LOWABL	E AND	AUT	HORIZ	ΑΤΙΟ	N TO TRAI	NSPORT			
REQUEST FOR ALLOWABLE AND Operator name and Address									² OGRID Number				
			MAYNARD OIL COMPANY N. CENTRAL EXPRESSWAY, #660						33016				
		00001	DALLAS, TX 75206						CII EFFECTIVE 11/1/99				
⁴ AP4 Number			³ Pool Name SCHARB, BONE SPRINGS					* Pool Code 55610					
<u>30 - 025-28195</u> ⁷ Property Code			* Property Name						* Well Number				
25548	49614				SCI	IARB 9					2		
10 S 11 or lot av.	11. ¹⁰ Surface Location Utor lot up. Section Township			Range Lot.Idn Feet from the				th Line	Feet from the	East/West line	County		
F			35E		1980		N		1980	W	LEA		
¹¹ Bottom Hole Location													
UL or lot no.	Section	Township			Feet from t	10	North/South line		Feet from the	East/West line	County		
ļ	ļ				<u> </u>		<u> </u>				-129 Expiration Date		
¹¹ Lse Code P	¹⁾ Product	ng Method Co P	de 📔 ¹⁴ Gas	Connection Date	• C-1	29 Perm	it Number		¹⁶ C-129 Effective	Date	-129 Expiration Date		
III. Oil at	ıd Gas T	ransporte	rs						r				
^{ue} Transpo OGRII		1!	Transporter and Addres	10		Ð	21 O/G		²² POD ULSTR Location and Description				
			/ MIDSTREA	23323		30	G						
		0 LOUISIAN	A #5800, HOU	STON, TX 7700	2 5050				•••				
21778		SUNOCO, I	NC 1004 N B	IG SPRING #57	5	23291	1 0	MARAN	· · · · · · · · · · · · · · · · · · ·				
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			HDLAND, TX		Sat of the	iand waterth.			<u> </u>				
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No.	國的時												
IV. Prod	<u>總限權</u>	lor.			201100	and to with test	an an blan than a b		<u>u</u>	••••	· · · · · · · · · · · · · · · · · · ·		
	"POD				24	POD U	LSTR Loca	tion and l	Description				
2329750)												
V. Well Completion Data		ion Data											
¹⁵ Sp	⁴⁸ Spud Date		¹⁶ Ready Date		* ¹ TD		²⁶ PB ED		¹⁹ Perfor	ations	³⁰ DHC, MC		
	²¹ Hole Size		²¹ Casing & Tubing		g Size		" Depth S		et	" S	acks Cement		
	*									<u> </u>			
VI. Well Test Data "Date New Oil "Ga			is Delivery Date ³⁷ To		est Date		³⁸ Test Length		³⁹ Tbg. Pressure		48 Csg. Pressure		
41 Ch	41 Choke Size		4 ⁰ 00 0		Water		44 Gas		⁴⁵ AOF		⁴⁶ Test Method		
" Thereby ce	rtify that the r	ules of the Oil (Conservation D	ivision have been	complied								
with and that knowledge a	nd beligf.			plete to the best o	of my	1	(JIL C	ONSERVA	HON DIV	ISION		
Signature: Gassenden Finta						Approved by:							
Printed name	Printed name: CASSONDRA FOSTER						Tinle:						
Title: MANA	Litle: MANAGER LAND AND MARKETING							Approval Date:					
Date: 11-13/9	Phone: 2	14-891-8461		ana G. 19 et 70 60									
** If this is a	change of op	erator fill in th		nber and name o									
	<u> </u>	()		TAR EXPLORA	$\frac{1}{100}$		CTION CO	MPANY	023846	Title	Date		
Previous Operator Signature Printed Name Filite Date G. L. NORDLOH PRESIDENT AND CEO 11/12/99													

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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 operatore unapproved.

- Operator's name and address 1.
- 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 NC Recompletion З.
 - - сH
 - Change of Operator Add oll/gondenents transporter
 - Cliange oll/condensate transporter Add gas transporter
 - Change gas transporter Request for test allowable (Include volume requested) CO
 - If for any other reason write that reason in this box.
- The API number of this well 4.
- The name of the pool for this completion Б.
- The pool code for this pool 6.
- The property code for this completion 7.
- The property name (well name) for this completion Β.
- The well number for this completion 9,
- 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.
 - Lease oode from the following table:

 0010 110111 1111
Federal
State
Fee
Jicerille
Navalo

12.

6 P j N U

- Ute infountein 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 transporter
- The permit number from the District approved C-129 for this completion 16.
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR of the expiration of C-129 approval for this completion 17.
- The gas or oil transporter's OGRID number 10,
- Name and address of the transporter of the product 19,
- The number seeigned 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 Oli 21.
 - Gas
- The ULSTR location of this POD If it is different from the well completion location and a short description of the POD (Exemple; "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", 24. Tank",etc.)
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 20.

bottom.

Number of sacks of coment used per casing string 33.

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 oll was first produced 34.
- MO/DA/YR that gas was first produced into a pipeline 35.
- MO/DA/YR that the following test was completed 36.
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38,
- Flowing assing pressure oil wells Shut-in casing pressure gas wells 39.
- Diameter of the choke used in the test 40.
- Barrels of oil produced during the test 41.
- Barrels of water produced during the test 42.
- MCF of gas produced during the test 43.
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well: 45.
 - Flowing Pumping Sweeping
 - Þ
 - It 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 48.
 - The previous operator's name, the signature, printed name, and title of the previous operator's representative suthorized to verily that the previous operator no longer operates this completion, and the date this report was 47. signed by that person

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