District I 1625 N. French Dr., Hobbs, NM 88240

District II 1301 W. Grand Avenue, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

Date:

State of New Mexico Energy, Minerals & Natural Resources

Reformatted July 20, 200

Form C-10

Oil Conservation Division 1220 South St. Francis Dr.

Submit to Appropriate District Offic

District IV 1220 S. St. Francis							M 87505		DRIZ.	ATION	J TO		AMENDED REPOR	
¹ Operator nam	ny		OIII		RID Nu		O TRANSPORT 177888							
	76	³ Reason for Fil				_	ling Code/ Effective Date back; on production 02-05-03							
⁴ API Number 30 - 0 25-31	e					6 P	ool Code	27400						
7 Property Cod		Gerniomo Federal 9 Well Number 5												
II. 10 Surface Location				Foot from	the North South Feet from the					East/	West line	County		
1 1		19S	9S 33E		660		Line		1650		East(Wesymile	Lea	
UL or lot S	ection To		Range	Lot Idn	Feet from	the	North/Sou	ıth line	Feet f	rom the	East/	West line	County	
250 0000	-	oducing Method		14 Gas Connection 15		C-129 Permit Number				ffective Date		¹⁷ C-1	29 Expiration Date	
F Code P Date III. Oil and Gas Transporters							n/a n/a n/a							
18 Transporter OGRID		19 Transporter Name and Address				²⁰ POD ²			²¹ O/G		²² POD ULSTR Location and Description			
'037480	EOTT E	OTT Energy Pipeline D. Box 4666				1935010		0			Unit D Section 31, T-19-S, R-33-E			
Houston, Texas 77210-4			77210-4	666				7						
P.O. B			Box 1267 a City, OK 74602-1267				1935030		G da ser		Unit D Section 31, T-19-S, R-33-E			
											#	·		
,												•		
IV. Produ	ced Wat	er										F	·	
²³ POD 193	5050	²⁴ POD			and Descri tion 31,		n 9-S, R-3:	3-E				Y	CUL	
V. Well Co		n Data 6 Ready		1	²⁷ TD	Т	²⁸ PB7	mn	29	Perforat	long		³⁰ DHC, MC	
08-09-91		02/05/03		3 1050		8075'			7580)' - 7614'		n/a	
31 Hole	Size 17 1/2	³² Casing & Tubing Size			ng Size	33 Depth Set 527						³⁴ Sacks Cement 525		
12 1/4			8 5/8						 ,	 ,				
7 7/8						4198						1900		
1 110			5 1/2						91'		•	265	U	
VI. Well T		. <u>l</u>		2 3/8		İ		768	80'					
02-05-03 02/		as Delive 02/10/0	• [Test Date 2-16-03	i		t Length 24 hrs		³⁹ Tbg. Pressure 0		1	40 Csg. Pressure 0	
1 Choke Size n/a			43	Water 15		⁴⁴ Gas 6		45		5 AOF n/a		"Test Method Pumping		
1 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: Salvana Bonnur						i	Approved by: ORIGINAL SIGNED BY							
Printed name: Sabrina Bonner							Title: PAUL F. KAUTZ PETROLEUM ENGINEER							
Title: Regulatory Analyst						7	Approval Date: MAR 20 2003							
Date: 02-18-03 Phone: 817-335-2222												M4		
						-					-		t	

New Mexico Oil Conservation Division C-104 Instructions

Please Note: Use form C-104A for "Change of Operator" and form C-104B for "Change of Operator Name".

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°. 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 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.

improp	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.	23.	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.				
3.	Reason for filing code from the following table: NW New Well RC Recompletion 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	24.	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.).				
	AG Add gas transporter CG Change gas transporter RT Request for test allowable (Include volume	25.	MO/DA/YR drilling commenced.				
	reallestea)	26.	MO/DA/YR this completion was ready to produce.				
	If for any other reason write that reason in this box.	27.	Total vertical depth of the well.				
4.	The API number of this well.	28.	Plugback vertical depth.				
5.	The pool code for this pool	29.	Top and bottom perforation in this completion or casing shoe and TD if openhole.				
6. 7.	The pool code for this pool. The property code for this completion.	30.	Write in 'DHC' if this completion is downhole commingled with another completion or 'MC' if there is more than one non-commingled completion in this well bore. Attach actual completed well bore diagram				
8.	The property name (well name) for this completion.						
9.	The well number for this completion.	31.	Hole size.				
10.	The surface location of this completion. NOTE: If the	32.	Outside diameter of the casing and tubing.				
	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.	33.	Depth of casing and tubing. If a casing liner, show top and bottom.				
11.	The bottom hole location of this completion.	34.	Number of sacks of cement used per casing string.				
12.	Lease code from the following table: F Federal S State	The fo	ollowing test data is for an oil well. It must be from a test cted only after the total volume of load oil is recovered.				
	P Fee I Jicarilla	35.	MM/DD/YY that new oil was first produced.				
	N Navajo U Ute Mountain Ute I Other Indian Tribe	36.	MM/DD/YY that gas was first produced into a pipeline.				
	1 Office matan Tribe	37.	MM/DD/YY that the following test was completed.				
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift	38.	Length in hours of the test.				
14.	P Pumping or other artificial lift MM/DD/YY that this completion was first connected to a gas	39.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells				
15.	transporter. The permit number from the District approved C-129 for this	40.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells				
	completion.	41.	Diameter of the choke used in the test.				
16.	MM/DD/YY of the C-129 approval for this completion.	42.	Barrels of oil produced during the test.				
17.	MM/DD/YY of the expiration of C-129 approval for this completion.	43.	Barrels of water produced during the test.				
18.	The gas or oil transporter's OGRID number.	44.	MCF of gas produced during the test.				
19.	Name and address of the transporter of the product.	45.	Gas well calculated absolute open flow in MCF/D.				
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.	46.	The method used to test the well: F Flowing P Pumping S Swabbing If other method please write it in.				
21.	Product code from the following table: O Oil G Gas	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.				
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.)						