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District State of Ne PO Box 1980, Hobbs, NM 83241-1980 Escrey, Minerals & Natur				ew Me: ral Resource	W Mexico al Resources Department			Rev	Form C-104 Revised February 10, 1994					
Natrie II 10 Drawer DD, Arteala, NM 85211-0719 OIL CONSERVA Natrie III PO BO:					DIVISI	ISION Submit			Instructions on back to Appropriate District Office 5 Copies					
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F	Р		2	/15/97							<u> </u>			
I. Oil and C	Gas Trans		TS Baporter !	, Name		14		1.0.5		1)		······		
OGRID	 		and Addres			" PC		" O/G		¹¹ POD UI and D	STR Lo			
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7. Produced	Water	<u> </u>												
28135	u					" POD U	LSTR Loca	uon and I	escription					
. Well Com	pletion D	ata			<u> </u>						·			
" Spud Dat	1		" Ready D			" TD			" PBTD		- 11	Perforstions		
1/23/9 * Hold	1		2/15/9	/ Lasing & Tu	ibing Size	7955'		Depth Se			- 3700, & - 3716 • Cement			
On file.								Depta Se	·	Squeez) sks from		
												to 3090'		
				······										
I. Well Test	Data													
" Date New Oil	°C	as Deliv	ery Dale		Test Date		" Test Le		" Tog.	Pressure		" Cag, Pressure		
2/16/97 	2/16/97		2/17/97			24 hrs		41.00			4 77 - 4 M - 4			
- Choke Size			"ou -		4 Water 0		" Сы 5		" AOF		Pi	" Test Malaod Pumping		
	the rules of the mation given sh	Oil Coo	servation D	ivision have	been complied		~~~							
I hereby certify that ith and that the infor		1	1	,	or my	Approv			NSERVA ORIGINAU	SIGNED	EA TH	IRY SEXTON		
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IF THIS IS	S AN AMENDED READ READ REPORT AT THE T	ORT, CHECK THE BOX LABLED OP OF THIS DOCUMENT	2:
Report all Report all	gas volumes at 15.021 oil volumes to the nea	PSIA at 80°. est whole barrel.	2:
accompan	for allowable for a new ied by a tabulation of a with Rule 111.	ly drilled or deepened well must be the deviation tests conducted in	2
All section new and r	e of this form must be scompleted wells.	filled out for allowable requests on	-
changes o	ly sections I, II, III, IV of operator, property f a changes.	and the operator certifications for ame, well number, transporter, or	2
A separa completio		led for each pool in a multiple	2 2
	y filled out or incom unapproved.	plete forms may be returned to	2
1.	Operator's name and (ddress	-
2.	Operator's OGRID nur be assigned and filled	iber. If you do not have one it will in by the District office.	3
з.	NW New Well	from the following table:	2
	CH Change of C	perator	
	CO Chance oil/d	ensete transporter ondensate transporter	
	AG Add gas trat CG Change gas	ransporter	Ċ
	RT Request fo	test allowable (include volume , write that reason in this box.	:
			;
4.	The API number of th		1
5.	The name of the pool		
6.	The pool code for this		
7.	The property code for	this completion	
8.	The property name (v	ell name) for this completion	
9.	The well number for	his completion	
10.	United States governi	of this completion NOTE: If the nent survey designates a Lot Number nat number in the 'UL or lot no.' box. D unit letter.	
11.	The bottom hole loca	tion of this completion	
12.	Lease code from the F Federal S State P Fee J Jicarilla N Navajo U Ute Mounta I Other India	in Ute	
13.	F Flowing	d code from the following table: other artificial lift	
14.	MO/DA/YR that this gas transporter	completion was first connected to a	

- The permit number from the District approved C-129 for this completion 15.
- 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 18.

- Name and address of the transporter of the product 19.
- 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.
- he following table: Product code from 1 21.

Oil Gas

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G		

- 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 recomplation and this POD has no number the district office will assign a number and write it here. 23.
- The ULSTR location of this POD H 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
- 28. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well 27.
- Plugback vertical depth 28.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. Inside diameter of the well bore
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and 32. bottom.
- 33. Number of sacks of cement used par 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.

- MO/DA/YR that new oil was first produced 34.
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 37. Langth in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 40. Diameter of the choke used in the test
- Barrels of oil produced during the test 41.
- Barrels of water produced during the test 42.
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- 45. The method used to test the well:

F Flowing P Pumping S Swabbing If other mathod 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 46.
- 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 47.

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Sec. 1.