District I

PO Box 1980, Hobbs, NM 88241-1980

District II 811 South First, Artesia, NM 88210

District III

1000 Rio Reazos Rd., Axtec. NM 87410

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION 2040 South Pacheco

District TV 2040 South Pac	theco, Santa	n Fe, NM 8750	5		a rc, n					<u>X</u>	- 1774TT	ENDED REPORT	
I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT 'Operator name and Address Frisco Energy, L.L.C. 167452													
2431 E.	St., Su				3				Reason for Filing Code				
Tulsa,	OK 74			······································	V CH Effe				ective 12/01/97 • Pool Code				
30-0 25-04366 Eumont Yates Seven F							livers Queen				22800		
005090 23565 MaGruder State						Property Name				7 Well Number 004			
II. 10 S	Surface Section	Location	Range	Lot.ldn	Feet from	the	North/Sou	th Line	Feet from the	East/W	est line	County	
T	I 28		36E		1650)	Sou		990	990 East		Lea	
11 Bottom		Hole Lo											
UL or lot no.	Section	Township	Range	Lot Idn	Feet from	n the	North/Sor	ath line	Feet from the	East/W	est line	County	
12 Lee Code	¹³ Produ	cing Method (Code H Gas	Connection Date	n C	-129 Perm	it Number	•	C-129 Effective	Date	n C-	129 Expiration Date	
∏. Oil a	nd Gas	Transpor								-			
" Transporter OGRID			¹⁹ Transporter Name and Address		" PO		D	" O/G	²² POD ULSTR Location and Description				
P.O.		.O. Box	o Trading & Transp.,Ind Box 60628 nd, TX 78711-0628			075810 0 Same							
			<u>IX 7871</u> orporati				5830		Same				
003272			orook Avenue			75830 G			Jame				
										•			
							- 1 - 1 - 1						
	Weege,												
IV. Produ		ater											
В	POD					rod ut	STR Locati	lon and I	Description				
V. Well Completi				- 1	" TD		. ■ PBTD		*******	atlane		³⁶ DHC, DC,MC	
- Spud Date			Ready Date						2º Perforations			- DHC, DC,MC	
31 Hole Size		ze	n ,	Casing & Tubing	Size	²³ Depth		Depth Se	#		[™] Sac	ks Cement	
													
										-1			
VI. Well	Test D	ata					- · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·				
35 Date New Oil		* Gas 1	Delivery Date	" Tes	Date		²⁶ Test Length		" Tbg. Pressure			" Cag. Pressure	
" Chok	e Size		4 Oil	o W	aler .		4 Gas		4 A(OF		4 Test Method	
with and that th	ne informati			Division have been uplete to the best of			O1	IL CC	NSERVAT	ION	DIVIS	SION	
knowledge and belief Signature:							Approved by: ORIGINAL SIGNAL S						
Printed name: Charles [Smith							DISTRICT I SUPERVISOR						
Charles E. Smith Tille: Co- Manager							Approval Date: 7 1 2 1 4 3 4						
Date: 01/26/98 Phone 918-742-5200										· 			
4 If this is a change of operator fill in the OGRID number and name of the previous operator													
Hawkins, 011 & Gas, 1710. #010221 Printed Name Title Date													
1111	1100	11.21	194			. Turn	er, II		Land Mana		Title	Date 01/26/98	
		,		New M	exico Oil C-104	Conserv Instructi	ation Divisions	sion	••			• •	

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

A request for allowable for a newly drillad or deepened well must be

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

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, sporter, 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.
- 3. Reason for filing code from the following table:

RC CH

New Well
Recompletion
Change of Operator (include the effective date.)
Add oil/condensate transporter
Change oil/condensate transporter
Add gas transporter

AO CO AG CG RT

Change gas transporter Request for test allo for test allowable (include volume request for test allowable (include voice for requested)

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
- The pool code for this pool 6.
- 7. The property code for this completion
- The property name (well name) for this completion 8.
- 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.
- 11. The bottom hole location of this completion
- Lease code from the following table: 12.

Federal State Fee Jicarilla SP

Navajo Ute Mountain Ute Other Indian Tribe

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

- MO/DA/YR that this completion was first connected to a 14.
- 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
- 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.
- 21. Product code from the following table:

Oil Gas Ğ

- 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 24. well comple (Example: 'Tank",etc.)
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- 29. Top and bottom perforation in this completion or casing shoe and TD if openhols
- 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. 30.
- 31. Inside diameter of the well bore
- 32 Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and

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Number of sacks of cement used per casing string 34.

If 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 " 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.
- Diameter of the choke used in the test 41.
- 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
- The method used to test the well: 46.

 - F Flowing
 P Pumping
 S 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.