

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised March 25, 1999

Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address MAYNARD OIL COMPANY 8080 N. CENTRAL EXPRESSWAY, #660 DALLAS, TX 75206		¹ OGRID Number 33016
		³ Reason for Filing Code CH EFFECTIVE 11/1/99
⁴ API Number 30 - 025-26470	⁵ Pool Name EUNICE MONUMENT; GRAYBURG - SAN ANDRES	⁶ Pool Code 23000
⁷ Property Code 25545 19602	⁸ Property Name R. H. HUSTON, JR	⁹ Well Number 3

II. ¹⁰ Surface Location

¹⁰ U/L or lot no. 0	¹⁰ Section 8	¹⁰ Township 19S	¹⁰ Range 37E	¹⁰ Lot Idn	¹⁰ Feet from the 990	¹⁰ North/South Line S	¹⁰ Feet from the 1650	¹⁰ East/West line E	¹⁰ County LEA
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¹¹ Bottom Hole Location

¹¹ U/L or lot no.	¹¹ Section	¹¹ Township	¹¹ Range	¹¹ Lot Idn	¹¹ Feet from the	¹¹ North/South line	¹¹ Feet from the	¹¹ East/West line	¹¹ County
¹¹ Eye Code P	¹¹ Producing Method Code P	¹¹ Gas Connection Date	¹¹ C-129 Permit Number	¹¹ C-129 Effective Date	¹¹ C-129 Expiration Date				

III. Oil and Gas Transporters

¹² Transporter OGRID	¹² Transporter Name and Address	¹² POD	¹² O/G	¹² POD ULSTR Location and Description
20809	SID RICHARDSON, 201 MAIN ST, FT WORTH, TX 76102	1848130	G	
21778	SUNOCO, INC., 1004 N. BIG SPRING #575 MIDLAND, TX 79701	1848110	O	

IV. Produced Water

¹³ POD 1848150	¹³ POD ULSTR Location and Description
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V. Well Completion Data

¹⁴ Spud Date	¹⁴ Ready Date	¹⁴ TD	¹⁴ PBTD	¹⁴ Perforations	¹⁴ DHC, MC
¹⁴ Hole Size	¹⁴ Casing & Tubing Size	¹⁴ Depth Set	¹⁴ Sacks Cement		

VI. Well Test Data

¹⁵ Date New Oil	¹⁵ Gas Delivery Date	¹⁵ Test Date	¹⁵ Test Length	¹⁵ Thg. Pressure	¹⁵ Csg. Pressure
¹⁵ Choke Size	¹⁵ Oil	¹⁵ Water	¹⁵ Gas	¹⁵ AOF	¹⁵ Test Method

¹⁶ 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: <i>Cassondra Foster</i> Printed name: CASSONDRA FOSTER Title: MANAGER - LAND AND MARKETING Date: 11/13-99 Phone: 214-891-8461		OIL CONSERVATION DIVISION Approved by: <i>[Signature]</i> Title: Approval Date: ¹⁷ If this is a change of operator fill in the OGRID number and name of the previous operator QUESTAR EXPLORATION AND PRODUCTION COMPANY Previous Operator Signature: <i>[Signature]</i> Printed Name: G. L. NORDLOH Title: PRESIDENT AND CEO Date: 11/12/99	
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New Mexico Oil Conservation Division
C-104 Instructions

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 operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filled 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
2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
3. Reason for filling code from the following table:

NW	New Well
RC	Recompletion
CH	Change of Operator
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
7. The property code for this completion
8. The property name (well name) for this completion
9. The well number for this completion
10. 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
12. Lease code from the following table:

F	Federal
S	State
P	Fee
J	Jicarilla
N	Navajo
U	Ute Mountain Ute
I	Other Indian Tribe
13. The producing method code from the following table:

F	Flowing
P	Pumping or other artificial lift
14. MO/DA/YR that this completion was first connected to a gas transporter
15. The permit number from the District approved C-129 for this completion
16. MO/DA/YR of the C-129 approval for this completion
17. MO/DA/YR of the expiration of C-129 approval for this completion
18. The gas or oil transporter's OGRID number
19. Name and address of the transporter of the product
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.
21. Product code from the following table:

O	Oil
G	Gas
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.)
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.
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.)
25. MO/DA/YR drilling commenced
26. MO/DA/YR this completion was ready to produce
27. Total vertical depth of the well

bottom.

33. 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.
34. MO/DA/YR that new oil was first produced
 35. MO/DA/YR that gas was first produced into a pipeline
 36. MO/DA/YR that the following test was completed
 37. Length in hours of the test
 38. 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. Barrels of water produced during the test
 43. MCF of gas produced during the test
 44. Gas well calculated absolute open flow in MCF/D
 45. The method used to test the well:

F	Flowing
P	Pumping
S	Swabbing

If other method please write it in.
 46. 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