District I

PO Box 1980, Hobbs, NM 88241-1980

District II

811 South First, Artesia, NM 88210

District III

District IV

State of New Mexico Minerals & Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco

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

5 Copies 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 ☐ AMENDED REPORT 2040 South Pacheco, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT 1 Operator name and Address ¹ OGRID Number Asher Enterprises LTD 1902 Savannah Drive, Artesia, New Mexico 88211 CH (eff. Nessan for Filing Code ⁴ API Number 30 - 0 25 31228 ⁵ Pool Name ' Pool Code Halfway Morrow 78052 1 Property Code 2418 Top Hat Federal "26" ' Well Number ¹⁰ Surface Location Ul or lot no. Section Township Range Lot.Idn Feet from the North/South Line Feet from the East/West line County N 20S 33E 660 South 1980 West Lea 11 Bottom Hole Location UL or lot no. Section Township Range Lot Idn Feet from the North/South line Feet from the East/West line County " Lse Code 13 Producing Method Code Gas Connection Date 15 C-129 Permit Number 16 C-129 Effective Date 17 C-129 Expiration Date Oil and Gas Transporters 11 Transporter OGRID 15 Transporter Name 10 POD ²¹ O/G 22 POD ULSTR Location and Address and Description LG & E Natl. Pipeline Co. 1934430 G 013382 921 W. Sanger Hobbs, New Mexico 88240 Texaco Trading & Trans. 022507 1934410 0 P.O. Box 60628 Midland, Texas 79711 Equilan Enterprises Produced Water n bod 24 POD ULSTR Location and Description 1934450 V. Well Completion Data 15 Spud Date ¹⁶ Ready Date 27 TD ¹¹ PBTD " Perforations 30 DHC, DC,MC

	1			1	,	
31 Hole Size 32 C		ing & Tubing Size	33 Depth Set	l .	[™] Sacks Cement	
VI. Well Test Da	ta					
35 Date New Oil	34 Gas Delivery Date	37 Test Date	31 Test Length	39 Tbg. Pressure	40 Csg. Pressure	
41 Choke Size	⁴² Oil	43 Water	⁴⁴ Gas	45 AOF	" Test Method	
"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:			OIL CONSERVATION DIVISION Approved by:			
Printed name: Kevin Jone)			Title:			
Title: Agend			Approval Date:	. :nô .00		
Date: 12-99	Phone: 50	8748-1424				
"If this is change of operator fill in the OGRID number and name of the previous operator George Mullen Sr. Reg. Affairs Analyst 01-08-99						
Mitchell I	perator Signature Energy Corporation	on (Ogrid No	Printed Name	Tid		

Post-it® Fax Note IF THIS IS AN

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changes of operator, property name, \ldots ell 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.

- 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.
- Reason for filing code from the following table:

 NW New Well

 RC Recompletion 3

RC CH CO CG CG RT RC Recompletion
CH Change of Operator (Include the effective date.)
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.

- The API number of this well 4.
- 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
- 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 code from the following table:
 F Federal
 S State
 P Fee
 J Jicarilla 12

SPJNU

Navajo Ute Mountain Ute Other Indian Tribe

The producing method code from the following table:

F Flowing
P Pumping or other artificial lift 13.

- 14. MO/DA/YR that this completion was first connected to a gas transporter
- 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 17.
- 18. The gas or oil transporter's OGRID number
- 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.
- Product code from the following table: O Oil G Gas 21.

- 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 Tank", etc.)
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 26.
- 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.
- 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
- Outside diameter of the casing and tubing 32.
- Depth of casing and tubing. If a casing liner show top and bottom. 33.
- 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

- 38. Length in hours of the 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.
- 41. Diameter of the choke used in the test
- Barrels of oil produced during the test 42.
- Barrels of water produced during the test 43.
- 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:

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.