

District I
PO Box 1968, Hobbs, NM 88241-1968
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Bravo Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Terry Pate c/o Oil Reports & Gas Services, Inc. P. O. Box 755 Hobbs, NM 88241		OGRID Number 153644
		Reason for Filing Code RC Eff. 11/1/96
API Number 30 - 0 25-32163	Pool Name House Blinebry	Pool Code 33230
Property Code 018864	Property Name Frances Evelyn	Well Number 1

II. ¹⁰ Surface Location

UL or lot no. N	Section 35	Township 19S	Range 38E	Lot Ida	Feet from the 990	North/South Line South	Feet from the 1740	East/West Line West	County Lea
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¹¹ Bottom Hole Location

UL or lot no. N	Section 35	Township 19S	Range 38E	Lot Ida	Feet from the 990	North/South Line South	Feet from the 1740	East/West Line West	County Lea
Lee Code P	Producing Method Code P	Gas Connection Date 01/94	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
020445	Scurlock Permian P. O. Box 4648 Houston, TX 77210-4648	2806931	O	N - 35-19S-38E
020809	Sid Richardson Gasline Co. 201 Main St. Ft. Worth, TX 76102	2806932	G	N - 35-19S-38E

IV. Produced Water

POD 2812434	POD ULSTR Location and Description
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V. Well Completion Data

Spud Date	Ready Date 11/23/96	TD 620D	PSTD	Perforations 6026-6120
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
Previously Reported.				

VI. Well Test Data

Date New Oil 11/23/96	Gas Delivery Date	Test Date 11/25/96	Test Length 24	Tbg. Pressure	Csg. Pressure
Choke Size	Oil 13	Water 120	Gas 40	AOF	Test Method Pumping

" 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: *Gaye Heard*

Printed name: Gaye Heard

Title: Manager

Date: 12/10/96

Phone: 505-393-2727

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY JERRY SEXTON

Title:

Approval Date:

" If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

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 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
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

4. MO/DA/YR that this completion was first connected to a gas transporter

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

6. MO/DA/YR of the C-129 approval for this completion

7. MO/DA/YR of the expiration of C-129 approval for this completion

The gas or oil transporter's OGRID number

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.

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
28. Plugback vertical depth
29. Top and bottom perforation in this completion or casing shoe and TD if openhole

30. Inside diameter of the well bore
31. 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
- 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