District i PO Box 1984, Hobbs, NM 88241-1988
District II
TO Drawer DD, Artenia, NM 88211-0719

District III 1009 Rio Brazes Rd., Azter, NM 87419

District IV

State of New Mexico Energy, Minaran & Nataral 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

) Boz 2088, Se		EQUEST				D AU	THOR	IZATI	ON TO TR				
Exxon	Corp.		•	e and Addres nitting						* OGRID Non 007673	aber		
P. O. Box 4358									* Resea for Filing Code				
Houst	on, TX	77210							CO effec	tive 5/1	/98		
	Pi Number				• P	vol Name * Pool Code					* Pool Code		
30-0 25-07011 Blinebry Oil & Gas											06660		
						perty Name				,	' Well Number		
004180			F. F	. Hardi	son -B-						4		
[. 10 S	Section	Location	Range	Lot.Ida	Feet from t		Northie	uth Line i	Feet from the	East/West lin	Current Current		
		1		Loting		LA¢			-		,		
B	34	215	37E		660	North		1980	East	Lea			
UL or lot no.		Hole Loc	Range	Lot Ida	Feet from	the	North/S	outh line	Feet from the	East/West lin	e County		
											,		
¹² Las Code	¹³ Produc	ing Mothed Co	ide " Gas	Connection Da	nte ¹⁴ C-1	129 Perm	it Number		C-129 Effective	Date 17	C-129 Expiration Date		
Р	Р			5/1/96									
II. Oil a	nd Gas	Transpor	ters	•									
" Transport	rier	19	Transporter I			* PO	D	^μ Ο/G	²² POD ULSTR Location and Description				
		Гехасо Е				94963	30		D 07 014				
022345		P. O. Bo			200 A 4	5450.		G	P-27-21S-37E F. F. Hardison -B- T/B				
and an		Eunice, avajo Re			i			Second Second					
015694		. 0. Boz		company	_09	4961)	0	P-27-21				
	A	rtesia,	, NM 88211-0159					F. F. Hardison -B- T/B		-B - T/B			
	ine belakti				te sono								
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						March 1993		Sector Sectors					
	1. 1998. 		···- <u></u> <u></u>										
V. Prod	POD	ater							Description	· ·			
0949			same a	s csg	-		LAIKLOC		veernpuoe				
V. Well		tion Data								<u> </u>			
	and Date		²⁴ Ready D	ate		" TD			" PBTD		²⁴ Perferations		
			·										
	" Hole Siz	•	²⁴ Casing & Tubing Siz			²² Depth Se			t ³³ Sacks Comant		iecks Cement		
VI. Well	Test D	ata		· · · · · · · · · · · · · · · · · · ·									
¹⁴ Date	¹⁴ Date New Oil ¹⁴ Gas		Delivery Date ²⁶ Test I		Test Date	²⁷ Test Longth		ength	²⁰ Tbg. Pressure		" Cag. Pressure		
" Choke Sim			4 Oli 4 Water		* Water	4 Gas~		4 AOF		" Test Method			
with and that i knowledge and Signature:	the informati a belief.	nutes of the Oil as gives above	is true and com	upicts to the be	· · · · · · · · · · · · · · · · · · ·	<u> </u>	-	ORIGIN	DNSERVAT		ISION		
Judy Bagwell						Title: FIELD REP. N							
Tale: Supt. Staff Off. Asst.						Аррго	vai Dels:		<u>1 8 1998</u>				
-	-12-9			713-431-		L							
" If this is a	change of e	perater fill in	the OGRID at	and or and an	ne of the prov	riene eça	relet-						
	Presien	Operator Sig				Data	ted Name			Title-	Date -		

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New Me Las Oil Conservation Division C-104 Instructions

		C-104 Inst	ructions			
IF THIS	IS AN AI DED REPOR	MENDED REPORI. CHECK THE BOX LABLED T AT THE TOP OF THIS DOCUMENT	2 2 .	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.)		
A reque	ui oil volum at for allow	nes at 15.025 PSIA at 6(P. es to the nearest whole barrel. able for a newly drilled or deepened well must be tabulation of the deviation tests conducted in	23.	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. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD		
accorda	nce with R	form must be filled out for allowable requests on	24.			
new and	d recomplet	led wells.		Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)		
changes	only sector s of operations ich changes	ns i, II, III, IV, and the operator certifications for or, property name, well number, transporter, or s.	25.	MO/DA/YR drilling commenced		
-	•	- 5 must be filed for each pool in a multiple	26.	MO/DA/YR this completion was ready to produce		
complet			27.	Total vertical depth of the well		
	riy filled rs unapprov	out or incomplete forms may be returned to	28.	Plugback vertical depth		
1.		's name and address	29.	Top and bottom perforation in this completion or casing shoe and TD if openhole		
2.	Operator	's OGRID number. If you do not have one it will	30.	Inside diameter of the well bore		
	•	ned and filled in by the District office.	31.	Outside diameter of the casing and tubing		
3.	Reason 1 NW RC	or filing code from the following table: New Well Recompletion	32.	Depth of casing and tubing. If a casing liner show top and bottom.		
	CH AO CO	Change of Operator Add oil/condensate transporter Change oil/condensate transporter	33.	Number of sacks of coment used per casing string		
	ÂĞ CG	Add gas transporter Change gas transporter	The fo	illowing test data is for an oil well it must be from a test cted only after the total volume of load oil is recovered.		
	RT	Request for test allowable (include volume requested)	34.	MO/DA/YR that new oil was first produced		
		y other reason write that reason in this box.	35.	MO/DA/YR that gas was first produced into a pipeline		
4.		number of this well	36.	MO/DA/YR that the following test was completed		
5.	The nam	e of the pool for this completion	37.	Length in hours of the test		
6. 7.	•	i code for this pool perty code for this complution	38.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells		
8.		perty name (well name) for this completion	39.	Flowing casing pressure - oil wells		
9.		i number for this completion		Shut-in casing pressure - gas wells		
10.		face location of this completion NOTE: If the	40.	Diameter of the choke used in the test		
	United & for this	itates government survey designates a Lot Number location use that number in the 'UL or lot no.' box.	41.	Barrels of oil produced during the test		
	Otherwi	se use the OCD unit letter.	42.	Barrels of water produced during the test		
11.	The bot	tom hole location of this completion	43.	MCF of gas produced during the test		
12.	Lease c F	ode from the following table: Federal	44 .	Gas well calculated absolute open flow in MCF/D		
	5 P J N U	State Fee Jicarille Navejo Ute Mountain Ute	45.	The method used to test the well: F Flowing P Pumping S Swabbing If other method please write it in.		
13.	l The pro F P	Other Indian Tribe ducing method code from the following table: Flowing Pumping or other artificial lift	46 .	The signature, printed name, and title-of the-perso authorized to make this report, the date this report we signed, and the telephone number to call for question about this report		
14.	MO/DA	/YR that this completion was first connected to a	47.	The previous operator's name, the signature, printed name		

- MO/DA/YR that this completion was first connected to a gas transporter 14.
- 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.

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Product code from the following table: O Oil --G Gas: 21.

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- 0

- 80n N85 0ns
- me 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

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