District I PO Box 1960, Hobbs, NM 88241-1960 District II NO Drawer DD, Artesia, NM 88211-0719			State of New Mexico Try, Minerals & Natural Resources Department OIL CONSERVATION DIVISION					Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office					
District III 1000 Rio Brazos Rd., Aztec, NM \$7410			PO Box 2088 Santa Fe, NM 87504-2088								5 Copies		
District IV PO Box 2088, 1		1		Salla		61304	+-2000 :			MA 🗔	AENDED REPORT		
I.	•					ND AU	THOR	IZAT	ION TO TH	RANSPOR	T		
				Operator name and Address						² OGRID Number			
	Operat wisian	ing Comp a Suite	any 1740						007943 * Reason for Filing Code				
Houston, Texas 77002									CH-Change of Operator Effective: 1/1/96				
-	API Numbe	r j			6	Pool Nam	Pool Code						
30-0 25-06777			Blinebry Oil & Gas						······································		60 7248D		
['] Property Code -002100 18274			' Property Name Stephens Estate							1	Well Number		
		Location	<u> </u>					···					
U or lot no. L	Ul or lot no. Section Township		Range Lot.Idn		Feet from				Feet from the	East/West line	County		
				37E		1980		h	660	West	Lea		
UL or lot no.	Y	1 Hole Location Township Range Lot Idn Feet from the North/Sout											
		Townad	Range	LOC TUR	Feet from	I LAC	North/Sc	ици пре	Feet from the	East/West line	County		
P	¹³ Produc I	cing Method C	ode ¹⁴ Gas	Connection L 9-13-88		-129 Permi	it Number		C-129 Effective I	Date ¹⁷ (2-129 Expiration Date		
And the second sec		Transpor									· · · · · · · · · · · · · · · · · · ·		
" Transpo OGRID			' Transporter ! and Addres			^µ PO	D	¹¹ O/G	1	POD ULSTR and Descrip			
013063 PO Box 22 Midland,		281	ation 0	minimized in success in the second second is		0	L 24 T21S R37E						
022345			xpl. & Pr			585730		~~~~~~	L 24 Т	210 027			
V AND A	Bergers B	Sox 1137 Sunice, N				085750		G	L 24 T	21S R37E	, 		
						and the second							
	uced W	ater	~~					******	· · · · · · · · · · · · · · · · · · ·				
LI L	POD				3	• POD UL	STR Locat	ion and D	escription	······································			
		tion Data	the second s						· · · · · · · · · · · · · · · · · · ·		·····		
¹¹ Spud Date		³⁴ Ready Date			" ID		" PBTD		³⁹ Perforations				
Hole Size		» (ing Size	Size		Depth Set		³³ Sacks Cement					
								_ ·					
VI. Well Test Data Date New Oil Gae		elivery Date Mate		Test Date	it Date		ngth	M Thg. Pr	tsaure	²⁴ Csg. Pressure			
" Choke Size			4 Oil 4 V		* Water				4 AO	F	* Test Method		
	he informatio		Conservation D is true and com			Approve Title:	•		NSERVATI DRIGINAL HGI DUCKL		M STRION		
Title: GREG FOX Manager of Production							Approval Date: JAN 6 9 1355						
Date: 1/2	Mai 196	IN LINE OF LIND OF		3/222-	6275	 				<u> </u>			
47 If this is a		perator fill in 1	the OGRID au			ious opera	itor				·····		
BISON H		UM CORPO		By:	Bruce O				Pr	esident	12/20/95		
OGRID-(Operator Sign		ee (DR	Pring	Name			Tille	Date		

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	New Mexico Oil C-104	Conservation Instructions	n Division		
IF THE	S IS AN AMENDED REPORT, CHECK THE BOX LABLED DED REPORT" AT THE TOP OF THIS DOCUMENT	22.	T' • ULBTR location of this POD if it is different from the well completion location and a chort description of the POE		
Report	all gas volumes at 15,025 PSIA at 60°. all oil volumes to the nearest whole barrel.	23.	(Example: "Battery A", "Jones CPD",etc.) The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and		
accomp	et for allowable for a newly drilled or deepened well must be anied by a tabulation of the deviation tests conducted in ince with Rule 111.		this POD has no number the district office will assign number and write it here.		
new an	lons of this form must be filled out for allowable requests on d recompleted wells.	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.)		
changer	only sections I, II, III, IV, and the operator certifications for of operator, property name, well number, transporter, or uch changes.	25.	MO/DA/YR drilling commenced		
А вера	rate C-104 must be filed for each pool in a multiple	26.	MO/DA/YR this completion was ready to produce		
complet	lon.	27.	Total vertical depth of the well		
Imprope	rly filled out or incomplete forms may be returned to	28.	Plugback vertical depth		
1.	Operator'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 be assigned and filled in by the District office.	30.	Inside diameter of the well bore		
3.	Reason for filing code from the following table:	31.	Outside diameter of the casing and tubing		
1	NW New Well RC Recompletion CH Change of Operator	32.	Depth of casing and tubing. If a casing liner show top and bottom.		
	AO Add oil/condensate transporter CO Change oil/condensate transporter	33.	Number of sacks of cament used per casing string		
	AG Add gas transporter CG Change gas transporter RT Request for test allowable (include volume	The fo conduc	llowing test data is for an oil well it must be from a test cted only after the total volume of load oil is recovered.		
	requested) If for any other reason write that reason in this box.	34.	MO/DA/YR that new oil was first produced		
4.	The ADI sumbas of this well	35.	MO/DA/YR that gas was first produced into a pipeline		
5.		38.	MO/DA/YR that the following test was completed		
6.	The name of the pool for this completion The pool code for this pool	37.	Length in hours of the test		
7.	The property code for this completion	38.	Flowing tubing pressure - oll wells Shut-in tubing pressure - gas wells		
8.	The property name (well name) for this completion	39.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells		
9. · ···· 10. · ·	The well number for this completion	40.	Diameter of the choke used in the test		
	The surface location of this completion NOTE: If the United States government survey designates a Lot Number	41.	Barrels of oil produced during the test		
	for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.	42.	Barrels of water produced during the test		
11.	The bottom hole location of this completion	43.	MCF of gas produced during the test		
12.	Lease code from the following table:	44.	Gas well calculated absolute open flow in MCF/D		
a tarana a	F State	45.	The method used to test the well:		
	P Fee J Jicarilla		F Flowing P Pumping		
•	N Navajo U Ute Mountain Ute		S Swabbing If other method please write it in.		
ş	1 Other Indian Tribe	46.	The signature, printed name, and title of the person		
	The producing method code from the following table: F Flowing P Pumping or other artificial lift		authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report		
14. 1	MO/DA/YR that this completion was first connected to a gas transporter	47.	The previous operator's name, the signature, printed name, and title of the previous operator's representative		
15. 1 t	The permit number from the District approved C-129 for this completion		authorized to verify that the previous operator is representati operates this completion, and the date this report w signed by that person		
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				
.	he gas or oil transporter's OGRID number				
,	ame and address of the transporter of the product				
20. T v	The number assigned to the POD from which this product will be transported by this transporter. If this is a new well r recompletion and this POD has no number the district office will assign a number and write it here.				
•	roduct code from the following table:				

code from the following table: Oil Gas l ş O G

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