District I
PO Box 1980, Hobbs, NM 88241-1980
- District II

State of New Mexico crey, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994 Instructions on back

OGRID-002424

NO Drawer DD District III	, Artesla, N	, C	OIL CONSERVATION DIVISION					Submit to Appropriate District Office						
1000 Rio Brazo District IV	e Rd., Azio	c, NM 87410		PO Box 2088 Santa Fe, NM 87504-2088					5 Copie					
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Floyd Operating Company									007943					
711 Louisiana Suite 1740											3 Reason for Filing Code			
Houston, Texas 77002									CH-Change Effec	CH-Change of Operator Effective: 1/1/96				
· ·	API Number			Pool Nam	8	Pool Code			ool Code					
30 - 0 25-06778			I	& Gas		Q 6660 724			72480					
Property Code			S	' Property Na te	ine	2 Well Nu		il Number						
	Surface													
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		Hole Lo		1 - 1 - 1	 -		,			· · · · · ·		- 		
UL or lot no.	Section	Township	Range	Lot Idn	Feet	from the	North/Sout	h line	Feet from the	East/V	est line	County		
13 Lee Code	D Produc	ing Method (Code ¹⁴ Gas	Connection D)ale	" C-129 Perm	it Number		C-129 Effective	Date	" C-1	29 Expiration Date		
P		P		-13-88		• • • • • • • • • • • • • • • • • • • •								
III. Oil a	nd Gas	Transpo				***					<u></u>			
II Transporter OGRID			15 Transporter Name and Address			³⁴ POD ³¹ O/G		' O/G	POD ULSTR Location and Description					
		antern	ntern Petroleum corporatio				0585710 0		L 24 T21S R37E					
		PO Box 2281				ر رورون دهر دورون میشوند	METAL SAMPLES	11 24	1213	K)/I	.			
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	Comple		M Ready Date			Ţ	¹¹ PBTI)	T	29 Perforations					
Spud Date			** Acady Date		TD re		1		1010	1	A CI 101 AUGUS			
M Hole Size			²¹ Casing & Tubing Size				³³ Depth S			<u></u>	10 Sacks	¹⁰ Sacks Cement		
note one														
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377 337-11	Took D	\- \-												
VI. Well Test Data "Date New Oil Gas Delivery Date Test Date							77 Test Length			,LCBB II LB		" Cag. Pressure		
Date	New Ou	"	Desirery Dan		IIII DENI		100 200	, 						
" Cho	* Choke Size		41 Oil		u Water		[©] Gas		" AOF		_	"Test Method		
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with and that	the informati		e is true and coo				OIL	. CO	NSERVA?	ION :	DIVIS	IUN		
knowledge and belief. Signature:							Approved by: PAUSINAL (IL NED BY JERRY SEXTON)							
Printed name:							Tide:							
GREG F9X Tide: Manager of Production							Approval Date:							
							JAN 65 1895							
Date: 1/6	2/96		the OGRID at				-los							
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D. JOH	· · · · · ·			27.	2200						Title	Date .		

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT Report all gas volumes at 16,025 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. ate C-104 must be filed for each pool in a multiple A separate 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 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. 3. The API number of this well 4. The name of the pool for this completion 5. 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 N. Navajo U. Ute Mountain Ute I. Other Indian Tribe 12. The producing method code from the following table: F Flowing P Pumping or other artificial lift 13. MO/DA/YR that this completion was first connected to a 14. gas transporter 15. '

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

16,

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

D.

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- T' ULSTR location of this POD if it is different from the well completion location and a short description of the POI [Example: "Battery A", "Jones CPD",etc.)
- 23. The POD number of the storage from which water is move from this property. If this is a new well or recompletion an this POD has no number the district office will assign 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 POE (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- 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 openhols
- 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
- 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.

- MO/DA/YR that new oil was first produced 34.
- 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
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- 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
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well: F Flowing
 P Pumping
 S Swabbing
 If other method please write it in.
- The eignature, 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 46.
- 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 47.