<u>District 1</u> 1625 N. French Dr., Hobbs, NM 88240			State of New Mexico Energy, Minerals & Natural Resou					irces	Form C-104 CS Revised March 25, 1999			
<u>District II</u> 811 South First, Actesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410			OIL CONSERVATIO 2040 South Pa Santa Fe, NM				acheco			Submit to Appropriate District Office 5 Copies		
District IV 2040 South Pac	heco, Santa F	e, NM 87505			·						MENDED REPORT	
]. [	R	<u>EQUES'</u>			<u>e and</u>	AUT	HORIZ	ATIC	N TO TRA			
			<ul> <li><sup>1</sup> Operator na MAYNARD (</li> </ul>				<sup>1</sup> OGRID Number 33016					
		8080	N CENTRAL				CH EFFECTIVE 11/1/99		•			
• ;	API Number		DALLA	ool Name			Colle     Colle     Colle					
30-025-20181-2046			WILSON M							87460		
<sup>'</sup> Property Code 2 55.5   <del>194</del> 17			* Property Name WILSON DEEP UNIT						* Well Number 001			
	Surface I	Location										
ty or lot no. F	Section 13	Township 21S	Range 34E	Lot.Idn	Feet from 1 2080	he	North/South Line N		Feet from the 2080	East/West li	ne County LEA	
						<b></b>						
<sup>11</sup> Bottom Hole Location												
UL or lot no.	Section	Township	Range	Lot Idn	Feet from	om the North/S		uth line — Feet from th		East/West li	ne County	
<sup>12</sup> Lse Code <sup>13</sup> Producing M S		ng Method C	Code <sup>14</sup> Gas Connection Date		" C-	C-129 Permit Number			<sup>14</sup> C-129 Effective Date		<sup>7</sup> C-129 Expiration Date	
l	1 1d Gas T	ransport	ers					<u> </u>		l		
III. Oil and Gas Transpo "Transporter		<u>runsport</u>	<sup>19</sup> Transporter Name			24 POD		<sup>21</sup> O/G	<sup>22</sup> POD ULSTR Location and Description			
OGRID 009171		and Address GPM GAS CORP., 4044 PENBROOK				2806053		G		and Descr	Iption	
		ODESSA, TX 79762										
					25481	11 11	()					
			INC., 1004 N BIG SPRING #575			20101						
			MIDLAND, 17	MIDLAND, TX 79701								
						1 9 1						
IV. Produ	uced Wa	ter			Array Beller	Alterican (12) take	ina na fisianita	laine an the station of the stationo			······································	
[	POD			<u>.</u>	1	* POD UI	LSTR Loca	ion and l	Description			
2548150												
V. Well Completion D												
<sup>15</sup> Spud Date			<sup>26</sup> Ready Date				<sup>24</sup> PBTD		29 Perfora	ations	™ DHC, MC	
" Hole Size			<sup>12</sup> Casing & Tubing Size			<sup>33</sup> Depth S			et	34	Sacks Cement	
							· .				• • • • • • • • • • • • • • • • • • • •	
l	(D) . D	<u> </u>	]		<u>,,,,,,,,,</u> ,,,,					,,		
VI. Well Test Da		1.2. <sup>36</sup> Gas Delivery Date		<sup>17</sup> .Te	<sup>17</sup> Test Date		<sup>34</sup> Test Length		<sup>39</sup> Tbg. Pressure		<sup>40</sup> Csg. Pressure	
4) Choke Size			4 Oil - 4 Y		Vater		44 Gas		45 AOF		46 Test Method	
	the informatio	n given above		Division have been oplete to the best o		Арргоч		DIL CO	DNSERVAT	TION DIV	/ISION	
Printed name:						Title:		<u></u>		·····		
Tide: MANAGER LAND AND MARKETING							Approval Date:					
Date: 11/13/99		Phone: 2	14-891-8461									
<sup>44</sup> If this is a	change of ope	rator fill in t		nber and name of	•	•						
Į	Previous	Operator Sig		ESTAR EXPLOR	ATION AN		JCTION C	DMPAN	4 023846	Title	Date	
[			4	X/X			ORDLOH		<u> </u>	RESIDENT A		
			$\sim$	()								

## IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "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 barral.

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.

esparate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

- Operator's name and address 1.
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.

З.

- Reason for filing code from the following table: NW New Well IIC Recompletion CII Change of Operator AO Add oll/condensate transporter CO Change oll/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. If for any other reason write that reason in this box.
- The API number of this well 4.
- The name of the pool for this completion Б.
- The pool code for this pool 6.
- The property code for this completion 7.
- The property name (well name) for this completion 8.
- The well number for this completion 9.
- 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.
- Lesse code from the following table: F Federal 12.
  - Federal State Fee Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe

6 P

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13.

The producing method code from the following table: F Flowing P Pumping or other estificial lift

- MO/DA/YR that this completion was first connected to a 14. ges transporter
- The permit number from the District approved C-129 for this completion 16.
- MO/DA/YR of the C-129 approval for this completion 10.
- MO/DA/YR of the expiration of C-129 approval for this 17. completion
- The gas or oll transportar's OGRID number 10.
- 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: 21.
  - OIL 00 Q.a.s
- The ULSTR location of this POD II it is different from the well completion location and a short description of the POD (Exemple; "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", "Jones CPD Water 24. Tank",etc.)
- MO/DA/YR drilling commenced 26.
- MO/DA/YR this completion was ready to produce 20.
- Total vertical depth of the well 27

bottom.

Number of sacks of coment used per casing string 33.

The following test data is for an oil well it must be from a test conducted only siter the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produce 34.
- MO/DA/YR that gas was first produced into a pipeline 35.
- MO/DA/YR that the following test was completed 36
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38,
- Flowing assing pressure oil wells Shut-in assing pressure gas wells 39.
- Diameter of the choke used in the test 40.
- Barrels of oll produced during the test 41.
- Barrals of water produced during the test 42.
- MCF of gas produced during the test 43.
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well: 45.
- ine method user to test the well: F Flowing P Pumping -S Swebbing II other method please write it in.
- The signature, printed name, and title of the parson 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 suthorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 47.

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