District i PO Box 1980, Hobbs, NM 22241-1980 District II

State of New Mexico

Form C-104 Revised February 10, 1994

NO Drawer DD, Artenia, NM 88211-0719 District III 1900 Ris Brame Rd., Astec, NM 87410	PO Box 2088				Revised February 10, 19 Instructions on ba Submit to Appropriate District Offi		
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REQUES	FOR ALLOW	ARIF AN	ID AII <del>ru</del>		T0): == =	AME	NDED REPO
Exxon Corp.	Operator name and A	ddress	D AUIH	URIZAT	TON TO TI	RANSPORT	
P.O. Box 1600, ML-	14					OGRID Number	•
Midland, Texas 79				(X)	CHANGE POR	007673	
025 API Number	Attn: N	Marsha Wil	son	9		tive 05/01	
30 · ATT - 30555	Funn	•	Pool Name	Y	2		/ 90
Property Code	EUMONT	YATES	-7 RURS	- QUEE	N (OIL)		2800
004194	1151	NEXICO	operty Name	<u> </u>		' We	Number
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	36E -	3.5	30   j	NERTH	1740	LEST	County
11 Bottom Hole Loc					7776	nes/	LEA
	Range Lot ida Feet		the Nort	h/South line	Foot from the	East/West line County	
12 Lee Code   15 Producing Method Co	ide " Gas Connection						County
SIF	5/1/96	1 - '	29 Permit Num	1	C-129 Effective	)ate   " C-82	9 Expiration De
I. Oil and Gas Transpor	ters						•
	Transporter Name	<del></del>	a POD	" O/G			
22345 Texace E	and Address -			- 0/G		12 POD ULSTR Leasing	
· P.O. Box	1137			-			
; Eurice ;		5			<b>-</b>		
14650 WARREN D.O. BO.	PETRILEUM C	CRP. D	949730	G	0 37		
TILSA	OK. 7416)					215-36E	
ZOYYS SCURLICK	PERHIAN TEP				NEW MEXIC	C-6- STATE	E T/BA
P.O. BOX	4648	(1)	949710	0			/
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Produced Water							
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Speed Date	" Ready Date						
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" Hale Size	" Casing & Tu	bine Sin-					
				2 Depth Set		" Saein (	innes.
Well Test Data							
" Date New Oil " Gas Del	Dete >	Test Date	17 <b>9</b> 7				
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Oppusha	Licuson				SIONER S73"		
Marsna Wilson			ide:		THICT I SHELL	1 14 2 W 18	
Staff Office Assistant			Approve Date: APR 2 6 1996				
1 1 1 1 (c	Phone (015) 600	-7871				AFR Z	0 1000
this is a change of operator All. in the	OGRED MANAGEMENT	of the province					
Product C							
Previous Operator Signature			Printed Name			Title	Dete

## New Mexico Oil Conservation Division C-104 Instructions

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 barrel.

A request for ellowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accompance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted weeks.

Fill out only sections i. II, III, IV, and the operator cartifications 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

Improperty 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.
- Resean for filing code from the following table: 3.

RCH AO

AG CG RT

New Well
Recompletion
Change of Operator
Add cil/condensate transporter
Change cil/condensate transporter
Add gas transporter
Change gas transporter
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
- The preperty code for this completion
- The property name (well name) for this completion 8.
- 9 The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number 10. for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.
- 11. The bottom note location of this completion
- Lease code from the following table: 12.

Federal State

SP

Fee Jicanilla

13. The producing method code from the following table:

Flowing Pumping or other artificial lift

- MO/DA/YR that this completion was first connected to a 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 17.
- 18. The gas or oil transporter's OGRID number
- 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.
- duct code from the following table: 21.

- The ULSTR location of this POD If it is different from the west completion location and a snort description of the POD (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 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 snort description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- MO/DA/YR drilling commenced 25.
  - MO/DA/YR this completion was ready to produce 28.
  - Total vertical depth of the well 27.
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casis shoe and TD if openhole 29.
- 30. Incide-diameter of the well bore.
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 32.
- Number of sacks of cament 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/DAYR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline

A ....

- MO/DA/YR that the following test was completed 38.
- 37. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure oil wells Flowing casing pressure oil wells Shut-in casing pressure oil wells 38.
- 39.
- Diameter of the choke used in the tests 40.
- 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
- The method used to test the well:
  F Flowing
  P Pumping
  S Swebbing 45.

- 46. The signature, printed name, and title-of-the-person authorized to make this report, the data-this report was signed, and the telephone number-to call-for questions about this report
- The previous operator's name, the signature, printed and title of the previous operator's represe authorized to verify that the previous-operator no operators this completion, and the date: this representation of the date: t 47. or no lange

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