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

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104
Revised October 18, 1994
Instructions on back
Submit to Appropriate District Office

District II 811 South First, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION 2040 South Pacheco

5 Copies

District IV 2040 South Pa	checo,							, NM 87							IDED REPORT
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Printed name:	Roni	nie H. \	Westbro	ok				Title:							
Title: Vice-P	reside	nt						Approval	Date:						
Date: 02/0	02/00			Phone:	915-68	84-6631									
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(CONSERVATION DIVISION

Submit to Appropriate District Office
5 Copies

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REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT EXXON CORPORATION P. O. BOX 4358 ATTN: PERMITTING ATTN	not IV				Janua I C.	1111 0	30. 2000			A1	MENDED REPOR	
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////		111 -	0	Phone -								
If this is a change of operator (if in the OGRID number and name of the provides operator—	Date: 9										<u></u>	
Printer Name - Title -	Date: 9						one operator-					

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 ba

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 cartifications for nanges of operator, property name, well number, transporter, or her such changes.

rate C-104 must be filed for each pool in a multiple

property filled out or incomplete forms may be returned to

- 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.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator

AO Add oil/concensate transporter

CC Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume registered)

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 5.
- 8. The pool code for this pool
- 7. The property code for this completion
- The property name (well name) for this completion 8.
- The west number for this completion

The surface location of this completion NOTE: If the nited States government survey designates a Lot Number r this location use that number in the 'UL or lot no.' box. therwise use the OCD unit letter.

- 11. The bottom hole location of this completion
- Lease code from the following table: 12.

State Fee Jicariile

Navelo Ute Mountain Ute Other Indian Tribe NU

The producing method code from the following table: F 13.

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

- 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.
- 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 recombission and this POD has no number the district office will assign a number and write it here. 20.
- act code from the following table: OB --Gae -21.

- The ULSTR location of this POD if it is different from the west completion location and a short description of the POD Example: "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 west completion location and a snort description of the POD Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.: 24.
- 25. MO/DA/YR drilling commenced
- MO/DAYR this completion was ready to produce 28
- Total vertical depth of the well
- Pługbacz vertical depth 28.
- Top and bottom perforation in this completion or casing shoe and TD If opennous 29.
- Incide diameter of the well bore 30.
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and 32.
- Number of sacks of cement used per casing string 33.

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.
- MO/DA/YR that gas was first produced into a pipeline -35.
- MO/DA/YR that the following test was completed 36.
- 37. Langth in hours of the test
- Flowing tubing pressure oil well Shut-in tubing pressure gas well 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- Diameter of the choice uses in the test 40.
- Barrels of oil produced during the test 41.
- Barrels 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.

Flowing Pumping Swapping

If other method please write it in.

- The signature, 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 signeture, 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

District 4
PO Box 1986, Hobbs, NM \$2241-1986
District II

State of New Mexico

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

20 Drawer DD, Artena, NM 88211-0719

OIL CONSERVATION DIVISION

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P.O. Box 1600, ML-14 Midland, Texas 79702								_		007673					
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Staff Office Assistant 4-22-46 Per (915) 688-7871						APR 2.6 1996									
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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 bar

A request for allowable for a newly drilled or despaned well must be accompanied by a Labulation 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 week.

Fill out only sections i_* II, III, IV, and the operator carufications 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 completion.

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

- Operator's name and address
- Operator's OGRED number. If you do not have one it will be assigned and filled in by the District office. 2.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recommension

CH Change of Operator

AO Add cil/condensate transporter

CO Change cil/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.

- 4. The API number of this well
- The name of the pool for this completion
- 6. The pool code for this pool
- The property seds for this completion
- 8. The property name (well name) for this completion
- 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 note location of this completion 11.
- Lease code from the following table: 12.

Federi State

Fee Jicarille

Navaje Ute Mountain Ute Other Indian Tribe

13. ducing m od code from the following table:

lang or other artificial lift

- 14. MO/DA/YR that this completion was first connected to a
- 15. The permit number from the District approved C-129 for this commences
- 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 addre. I of the transporter of the product 19.
- The number essigned to the POD from which this produ-will be transported by this transporter. If this is a new wo or recommense and this POD has no number the distri-office will assign a number and write it here. 20.
- Net code from the following table: Oil Gas: 21.

- The ULSTR location of this POD if it is different from the west completion location and a short description of the POD (Example: "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 west completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.) 24.
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce 28.
- 27. Total vertical depth of the well
- 28 Plugback versesi depth
- 29. Top and bottom perforation in this completion or cas shoe and TD if openhole
- 30. Incide 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 bottom.
- Number of sacks of cement used per casing string 33

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/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 38.
- 37. Langth in hours of the test
- 38. Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells-
- 3**9**. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- Diameter of the choice used in the tester 40.
- 41. Barrels of oil produced during the test
- 42. Barrels of water produced during the ter
- 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 Swebbing 45.

S Swebbing
If other method please write it in.

- The signature, printed name, and to sutherized to make this report, the di signed, and the telephone number-to about this report
- The previous operator's name, the signand title of the previous operature authorized to verify that the previous operates this completion, and the signed by that person 47. W'8 10