District I PO Box 1980, H District II 811 South First, District III	, Artesia, Ni	M 88210	State of New Mexic <i>Chergy, Minerals & Natural Resources I</i> OIL CONSERVATION DI 2040 South Pacheco						Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies			
1000 Rio Brazos District IV		:	Santa Fe, NM 87505						AMENDED REPORT			
2040 South Pad	R	EQUEST	and the second			ND AU	THOR	IZATI	ION TO TR		and the second	
YARBOR	OUGH OI	L & GAS	Operator name and Address L. P.						' OGRID Number 151889			
1	L REPOR	RTS & GAS					3	Reason for Filin				
HOBBS,	NEW ME	EXICO 882							c	G 07/01		
*A 30 - 0 25 -	PI Number		' Pool Name								• Pool Code	
1	roperty Code		PADDOCK * Property Name						<u> </u>		49210 Well Number	
TT 10 (018333		L. E. GRIZZELL								002	
II. ¹⁰ S Ul or lot no.	Surface .	Location Township	Range	Lot.Idn Feet fre		m the North/Sou		uth Line	Feet from the	East/West line	t/West line County	
A	08	225	37E		660	0	NORTH		660	EAST	LEA	
UL or lot po.	·····	Hole Loca	ation Range Lot Idn		Feet from the		North/South line		Feet from the	East/West line	Constr	
UL or lot bo. A	08	22S	37E	Tot ten	Feet (1700		NORTH		660	EAST	LEA	
¹⁷ Lae Code		ing Method Cod				¹⁰ C-129 Permit Numbe			* C-129 Effective I	Date "C-129 Expiration Date		
P III. Oil au	-d Gas	P Transport	ويتجاز والمتحد والمتحد والمحد و	3/09/55				<u> </u>				
" Transpor	rter		Transporters "Transporter Name			POD		³¹ O/G	" POD ULSTR Location			
OGRID		and Adaress							and Description			
015694	Р.	O. BOX	26438	<u> 1997</u>	0	A-08-22S-37E						
DYNE		NEGY MID	ESIA, NEW MEXICO 88211-0159				30		A-08-22S-37E			
1000		00 LOUIS	LOUISIANA, SUITE 5800				2643830 G A-08			28-376		
	HO	USTON, T	<u>EXAS 77</u>	7002-5050		a ang kang sa	2	an sig				
V. Produced Water												
F	²⁷ POD ²⁴ POD ULSTR Location and Description											
V. Well C	Complet	tion Data							1 7 17 11:51			
^{II} Spud		* Ready Date			" TD	* PBTD		rD	" Perfora	tions	» DHC, DC,MC	
	³¹ Hole Size				uing & Tubing Size		¹¹ Depth Se					
	NUIC Just		<u>````</u>	and a round		-	Depin a	<u>z</u>		acks Cement		
······												
	·····									•		
										•		
VI. Well	Test Da		livery Date									
Date Int	iw Ou	- GB Da	ivery Date	** 1 6 5	it Date	" Test Le		igth	" Tog. Pr	tecure	" Cag. Pressure	
41 Choke Size		4 08		4) Water			* Ges		* 40	r .	" Test Method	
41 l hereby certi	fy that the ru	les of the Qil C	onservation Division have been complied									
with and that the knowledge and t	e information	i given above is	true and com	iplete to the best of	of my		OI	L CO	NSERVATI	ION DIVI	SION	
Signature:		Hear	ð			Approve	Approved by: ORIGINAL SIGNED BY					
Printed name:	GAYE HE	<u> </u>					Tile: FIELD FIEP. II					
Title:	AGENT		,		Approvi	Approval Date: SEP 2 4 1998						
Date: 09	9/22/98			(505) 393						<u> </u>		
• If this is a c	sange of ope	erator fill in the	e OGRID nu	unber and name	of the pre	rious oper	ator					
Previous Operator Signature Printed Name Title Date												

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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 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.

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 1.

3.

12.

- 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 (include the effective date.) 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.
- 4. The API number of this well
- 5. The name of the pool for this completion
- 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.
- 11. The bottom hole location of this completion
 - Lease code from the following table: F Federal S State
 - SP

 - Fee Jicarilla
 - Ň
- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: 13. Flowing Pumping or other artificial lift

- 14. MO/DA/YR that this completion was first connected to a gas transporter
- The permit number from the District approved C-129 for this completion 15.
- 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
 - 18. The gas or oil transporter's OGRID number
 - 19. Name and address of the transporter of the product
 - 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 to number the district office will assign a number and write it here. 20.
 - 21. Product code from the following table: 0 G Oil Gas
 - 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", "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 easign 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", etc.) 24.
 - 25. MO/DA/YR drilling commenced
 - MO/DA/YR this completion was ready to produce 26.
 - 27. Total vertical depth of the well
 - 28. Plugback vertical depth
 - Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
 - Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' if there are more than three non-commingled completions in this well bore. 30.

- 31. Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and hottom
- 34. Number of sacks of cement used per casing string

If 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.

- 35. MO/DA/YR that new oil was first produced
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- 40.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells
- 41. Diameter of the choke used in the test
- 42. Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44 MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- 46. The method used to test the well:
- F Flowing P Pumping S Swabbing 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 47.
- 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 48.