API Number 30 - 0 25-10136 ' Property Code			State of New Mexico Energy, Mineren & Natural Resource Departs OIL CONSERVATION DIVISI PO Box 2088 Santa Fe, NM 87504-2088 FOR ALLOWABLE AND AUTHOR Operator name and Address					ON	Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies AMENDED REPORT ON TO TRANSPORT 'OGRID Number 007673 'Remon for Filing Code RC eff. 01/10/96 'Post Code 06660 'Well Number				
004179			J. L. Greenwood							15			
		Location									Ennt/West h		
lerinche. S M	09	Terrahip 22S	Range I 37E	Lot.lda -	76	O	North/South Line South		Feel from the 660		West	Lea	
¹¹ Bo	ottom	Hole Loo	ation		1				· · · · · ·				
UL er ist ac.	Section	Township	Range	Lot Ida	Feat	from the	North/S	iosth äse	Feet	from the	East/West M	ne County	
¹¹ Les Code P	¹⁰ Produ	ing Mahad C		.0/96		" C-129 Pe	rmit Numee		* C-12	9 Effective i	Date 1	' C-129 Expiration Date	
I. Oil and		Transpor	TETS	Ngje		28	POD	" O/G	<u> </u>		" POD ULST	R Lessies	
OGRID			and Address			004052	0		and Description				
020809	20	D1 Main	Street	ormet	.0.	0949530 G		16	I-09-22S-37E J L Greenwood T/B #1				
020667			TX 76102 eline Cor	0949	0949510 0								
	P) Box 26 Duston T	548				0949310 10			Same as csg			
	iced V POD						D ULSTR LA		i Duer	iptice.			
094955			Same as c	sg			<u> </u>					<u></u>	
V. Well Completion Da			* Reedy Date			" TD			* PETD			* Performine 5409–5525	
_	" Hole á		1/10/96	Coning & Tul	ng & Tubing Sis		¹² Depth		6150		5622-5764		
15				0-3/4		•	329				300		
9-7/8			7-5/8				3178				1800		
6-3/4			5-1/2				6499				200	· · · · · · · · · · · · · · · · · · ·	
VI. Well	Test	Data	2	-3/8 tb	g		5318				l		
Date I		" Ge	Delivery Date	24	Test De	•	" T u	Langth		* Tog.	Pressee	** Cag. Pressure	
01/11/96		01	<u>/11/96</u>				24 hrs				AOF	" Test Mathed	
		9	92.6 23			155		1949 -			P		
"I haven servery that the rules of the Oil Conservation Division have been con with and that the information group above is true and complete to the best of in traperindeps and belief. Signamore: Primes serve: Don J. Bates					Т	OIL CONSERVATION DIVISION Orig. Signed by Paul Kautz Geologist Title:							
Title:			y Specialist				Approval Date:				MAR 2 1 1996		
		96	Phone: (915/688									
	<u></u>	ines Operator.					Primes Na	<u> </u>			T	lie Dat	

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	IS AN AMENDED REPORT, CHECK THE BOX LABLED DED REPORT [®] AT THE TOP OF THIS DOCUMENT	2
	ali gas volumes at 15.025 PSIA at 60°. Ali dii volumes to the nearest whole barrel.	:
accomp	ist for allowable for a newly drilled or deepened well must be langed by a tabulation of the deviation tests conducted in ince with Rule 111.	
	zons of this form must be filled out for allowable requests on a recompleted wells.	
change	only sections i, ii, iii, iV, and the operator certifications for e of operator, property name, well number, transporter, or ucn changes.	
A sec compie	arata C-104 must be filed for each pool in a multiple tuon.	
	erly filled out or incomplete forms may be returned to ors unapproved.	
1.	Operator's name and address	
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	
3.	Reason for filing code from the following table: NW New Well RC Recomplication 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.
- The API number of this well 4.
- 5. The name of the pool for this completion
- 6. The east 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
- Lasse code from the following table: 12.
 - Federal State Fee Jicarilla
 - SP

NU

- Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: 13. Flowing Pumping or other artificial lift Þ
- MO/DA/YR that this completion was first connected to a 14. and 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 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.
- Product code from the following table: O Oil G Gas 21.

- 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 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 24. weil complet Example: Tank",etc.)
- 25. MO/DA/VR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well 27.
- 28 Plughack vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if opennole 29.
- Inside 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. bottom.
- 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/VR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 37. Langth 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 well 39.
- Diameter of the choke used in the test 40.
- 41. Barrele of oil produced during the test
- Barrels of water produced during the test 42.
- MCF of gas produced during the test 43.
- 44. Gas well calculated absolute open flow in MCF/D
- 45. The method used to test the well:
- F Flowing P Pumping S Swebbing 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 46. about this report
- 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.



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