Nation I PO Box 1986, Hobbe, NM 58241-1980 District II PO Drawer DD, Artosia, NM 55211-6719 District III	State of New Mexico Derry, Minerala & Natural Resources Department OIL CONSERVATION DIVISION PO Box 2088					Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office					
1009 Rio Brezza Rd., Axee, NM 87410 District IV		Santa F	e, NM	87504	-2088			~~~~	1	5 Copies	
PO Box 2083, Sanda Fe, NM \$7564-2083 I. REOUEST		LONIAD	T T T	D 4 F W						NDED REPORT	
I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT											
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' Property Code	DRINKA	RD	! Pro	perty Name			19190 'Well Number			The second	
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U or lot no. Sertion Township	Range	Lot.Ida	Feet from	the /	North/Sou	th Live	Feet from the	Exel/We	st line	County	
G 22 22S	37E					NORTH 1909			EAST LEA		
UL or by no. Section Township	Access 2000 P. P. March 100	Lot Idn	Feet from	the	North/So	uth line	Fost from the	ELM/We	et live	County	
" Lee Code " Producing Method Code	с " Сы С	ondectica Date	e '' C-	29 Permi	Number		C-129 Effective	Date	" C-1	129 Expiration Date	
рр											
III. Oil and Gas Transporte	Contemporary and the second stress of	n ann Sagadh I an Ruis an The Lang at low		- 1. () () () () () () () () () (ord					
Transporter OGRID	and Address	lis e		" POE		¹¹ O/G	1	FOD LL	STR Lo escriptio		
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IV. Produced Water	1997 - 2007 - 272 - 264 - 269						-	Эман, компанияция так т ар.	100- 483 0-948 -	a and a subscript for an angle of a constrained or any subscript of a subscript o	
POD			24	POD UL	STR Locati	ion and D)escriptia n			nan 1994 Marina Kadalah Kadapatèn Angelangkan Angelangkan Kadalah Kadalah Kadalah Kadalah Kadalah Kadalah Kada	
V. Well Completion Data	ter man ter bil sit som för socialetiga med at	and the second state of th	1.47-494-41363-19 (rates)	nnis f ir folgendigeniger		and a star and a star of the s	an de 28 agressent de la constante en seu en	مېدىن ئۆر مەر مەر مەركارىيە ھ	National States and States	Succession and a succession and before the success of the	
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VI. Well Test Data	an and a state of the					I FENCIN VERSIONS				a na na shikana any na mangalaka da ka mata shi na matani	
Date New Oil Cas Del	very Date	* Tes	t Date	********	# Test Les	12 6 h	" Tog. P	Y935U 7 C	1	* Crg. Pressore	
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	74		elct		- G u		" AC)F		" Test Method	
" I bereby certify that the rules of the Oil Ce	ascrystion Dr	vision have been	a complied								
with and the information given above is true and complete to the best of my OIL CONSERVATION DIVISION											
Signature: Approved by: ORIGINAL SIGNED BY JORRY SEXTON											
Printed earne: R.L. WHEELER, JR.					Tide: DISTRICT I SUPERVISOR						
Title: ADMIN. SVC. COORD.					Approval Date: JAN 27 1995						
Date: 1-19-95 Phone: (505) 393-2144											
" If this is a change of operator fill is the OGRID number and name of the previous operator											
Previous Operator Signature Printed Name Title Date											
	andra ta kata manganan di sung Manganan kata kata kata kata kata kata	an a char - share a far a share an a share a s	an a		Same Port, Barr Stort, State State -	and a second		an nation	i tay ja system politikas at ta 1 - 131 - Antonio Santa Attentio		

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all ges 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,

1. Operator's name and address

- Operator's OGRID number. If you do not have one it will be easigned 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 AO Add eli/condensate transporter CO Change cil/condensate transporter AG Add ges transporter CG Change ges transporter RT Request for test allowable (Include volume requested) If for any other reason write that reason in this box. 3,
- 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
- The property name (well name) for this completion 8.
- 9. The well number for this completion
- 10. The surface location of this complation NOTE: If the United States government survey designates a Let Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table: Enderal SPJNU

 - Federal State Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: F Flowing P Pumping or other artificial lift 13.
- MO/DA/YR that this completion was first connected to a 14. gas vaneporter
- 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 completion
- 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 recomplation and this POD has no number the district office will assign a number and write it here. 20.

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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 GPD", etc.) 22.

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- 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: "Battary A Water Tank", "Jonas CPD Water Tank", etc.) 24.
- 25. MO/DA/YR drilling commanced
- 28. MO/DA/YR this completion was ready to produce
- 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,
- 30. Inside diameter of the well bore
- 31. Outside dismeter of the casing and tubing
- 32. Depth of casing and tubing. If a cosing liner show top and hottom
- 33. Number of sacks of cament used par 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/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 37. Longth in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- 39. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- 40. Diameter of the choke used in the test
- 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:

45

- 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 46.
- 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.

21.	Product	code from the i	following table:	•••				an a
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