

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

State of New Mexico
Energy, Minerals & Natural Resources Departme.

Form C-104
Revised February 10, 1994

District II
PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

Instruction on back
Submit to Appropriate District Office

District III
1000 Rio Brazos Rd., Aztec, NM 87410

PO Box 2088

Santa Fe, NM 87504-2088

5 Copies

District IV
PO Box 2088, Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address ARCH PETROLEUM INC. 10 DESTA DRIVE, STE. 420E, MIDLAND TX 79705		² OGRID Number 000962	
⁴ API Number 30 - 025-12146		⁵ Pool Name TUBB	
⁷ Property Code 014901		⁸ Property Name HIGGINS	
		³ Reason for Filing Code RECLASS FROM OIL TO GAS 1-1-96	
		⁶ Pool Code 60240 86440	
		⁹ Well Number 1	

II. ¹⁰ Surface Location

UI or Lot. No. J	Section 29	Township 22S	Range 38E	Lot Idn.	Feet from the 1980	North/South Line SOUTH	Feet the 330	from East/West Line EAST	County LEA
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¹¹ Bottom Hole Location

UI or Lot. No.	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet the	from East/West Line	County
¹² Lse Code P	¹³ Producing Code P	Method	¹⁴ Gas Date	Connection	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date		

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
015694	NAVAJO REFINING CO. PL DIVISION DR. 159, ARTESIA, NM 88210	722110	O	
024650	WARREN PETROLEUM P. O. BOX 1589, TULSA, OK 74102	281715 722430	G	

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length 24 HRS.	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Bobbie Brooks*

Printed Name:
BOBBIE BROOKS

Title:
PRODUCTION ANALYST

Date:
JANUARY 24, 1996

Phone:
915-685-1961

OIL CONSERVATION DIVISION

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Approved by:

Title:

Approved Date:

APR 1 1996

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

mP

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

Report all gas volumes at 15.025 PSIA at 60°.

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 filled 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

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 filling code from the following table:

NW New Well
RC Recompletion
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.

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

10. The surface location of the 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.

11. The bottom hole location of this completion

12. Lease code from the following table:

F Federal
S State
P Private
J Judicial
N Navajo
U Use Mountain Ute
I Other Indian Tribe

13. The producing method code from the following table:

P Pumping or other artificial lift
F Flowing

14. MO/D/A/Y/R that this completion was first connected to a gas transporter

15. The permit number from the District approved C-129 for this completion

16. MO/D/A/Y/R of the C-129 approval for this completion

17. MO/D/A/Y/R 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

20. 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.

21. Product code from the following table:

O Oil
G Gas

22.

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.)

23.

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.

24.

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.)

25.

MO/D/A/Y/R drilling commenced

26.

MO/D/A/Y/R this completion was ready to produce

27.

Total vertical depth of the well

28.

Plugback vertical depth

29.

Top and bottom perforation in this completion or casing shoe and TD if openhole

30.

Inside 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.

33.

Number of sacks of cement used per casing string

34.

MO/D/A/Y/R that new oil was first produced

35.

MO/D/A/Y/R that gas was first produced into a pipeline

36.

MO/D/A/Y/R that the following test was completed

37.

Length in hours of the test

38.

Flowing tubing pressure - oil well

39.

Shut-in tubing pressure - gas well

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

45.

The method used to test the well:

46.

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

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