

District I
PO Box 1900, Hobbs, NM 88241-1900
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Amar, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

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

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address RICE OPERATING COMPANY 122 W. TAYLOR HOBBS, NM 88240		OCRID Number 019174
		Reason for Filing Code CH 7-31-96
API Number 30 - 0 25-24399	Pool Name SWD, SAN ANDRES	Pool Code 096121
Property Code 009604	Property Name BLINEBRY DRINKARD, SWD	Well Number 002

II. ¹⁰ Surface Location

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
C	02	22S	37E		660	N	2305	W.	25

¹¹ Bottom Hole Location

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Lee Code S	Producing Method Code SWD	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OCRID	Transporter Name and Address	POD	OVG	POD ULSTR Location and Description
149972	Sundance Services, Inc. P.O. Box 1737 Eunice, NM 88231	2809371		
130908	Pate Trucking Company P.O. Box 1008 Hobbs, NM 88241	2809371		
012426	MacLaskey Oilfield Serv. Inc. P.O. Box 580 Hobbs, NM 88241	2809371		

IV. Produced Water

POD	POD ULSTR Location and Description

V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations	DEIC, DC, MC
Flow Size	Casing & Tubing Size	Depth Set	Sacks Cement		

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Top Pressure	Chg. Pressure
Choke Size	Oil	Water	Gas	API	API

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: *F. Wesley Root*

Printed name: F. WESLEY ROOT

Title: OPERATIONS MANAGER

Date: 8-13-97

Phone: (505) 393-9174

OIL CONSERVATION DIVISION
ORIGINAL
DISTRICT I SUPERVISOR

Approved by:

Title:

Approval Date:

AUG 18 1997

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

Rice Engineering Corp.

OCRIID No. 019174

Previous Operator Signature

Printed Name

Title

Date

F. Wesley Root

F. Wesley Root

Op. Mgr 8-13-97

IF THIS IS AN AMENDED REPORT, CHECK
"AMENDED REPORT" AT THE TOP OF THIS C E BOX LABELED
/MENT

Report all gas volumes at 15.026 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
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 (include the effective date.)
AO Add oil/condensate transporter
CO Add 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 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.
11. The bottom hole location of this completion
12. Lease code from the following table:
F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe
13. The producing method code from the following table:
F Flowing
P Pumping or other artificial lift
14. MO/DA/YR 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/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
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 Water Tank", "Jones CPD Water
Tank", etc.)
25. MO/DA/YR drilling commenced
26. MO/DA/YR 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. 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.

31. Inside diam. 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
bottom.
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
39. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
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 Strabbing
If other method please write it in.
47. 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
48. 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