District I PO Box 1980, Hobbs, NM \$8241-1980

State of New Mexico

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

Title

Date

District II 20 Drawer DD, Artesia, NM 88211-0719 District III

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

AMENDED REPORT

Previous Operator Signature

1000 Rie Brazos Rd., Aziec, NM 87410
District IV
PO Box 2008, Santa Fe. NM 87504-2008

District IV		27704 3000		Juliu 1	. 0, 11111	0,004	2000			X	AME	NDED REPORT	
PO Box 20 68, Se I.	rata Fe, 17m RI	EQUEST	FOR A	LLOWAE	BLE AN	D AUI	THORI	ZATI	ON TO TR	ANSP(ORT		
Operator name and Address									¹ OGRID Number				
Chance Properties c/o Oil Reports & Gas Services, Inc.									004058				
P.O. Box 755									Reason for Filing Code As Per OCD Ed Martin				
Hobbs, N.M. 88241									To Correst Land Type				
'API Number 'Pool Name									6 Pool Code				
30-025-27322 Langlie Mattix S							R-QU-GB				37240		
¹ Pr	operty Code		* Property Name					' Well Number			ell Number		
002	518		I	ng	1						1		
II. 10 S	Surface 1	Location											
Ul or lot me.				the	North/Sou	th Line	Feet from the	East/West line		County			
М	31	225	37E		330		South		330	Wes	West Lea		
11]	Bottom I	Hole Loca	ation										
UL or lot me.	Section	Township	Range	Lot Ida	Feet from	the	North/South line		Feet from the	East/West line		County	
М	31	22S	37E		330	,	South		330	Wes	West Lea		
13 Lac Code	15 Produci	ng Method Cod	ie i Gas	Connection De	ite 14 C-	129 Permit	alt Number		C-129 Effective I	Date	te 19 C-129 Expiration I		
P		P	(5-26-81									
III. Oil a	nd Gas	Transport	ers										
Transpor		19 7	Transporter			" POD	·	11 O/G	22 POD ULSTR Location				
OGRID	<u> </u>		and Addre	44					and Description				
020445		Scurlock		an Corp.	0	70251	0	0	<u> </u>				
(A)			. O. Box 4648 ouston, TX 77210-4648										
								-	<u> </u>	*			
02234		Texaco E P. O. Bo	-	& Prod.		70253	0	G					
		P. O. BO Tulsa O)									
						 -		 .					
	No. See To				200			() () () () () ()					
nesikuinesitean					2030	ionistra in con							
					Name of the last o				j				
	- 10 C									. —			
IV. Prod		ater											
n n	POD				3	POD UL	STR Local	bas soi	Description				
V. Well	Comple	tion Data											
s _l	pud Date		24 Ready Date		OT "				≥ PBTD		2º Perforations		
	* Hole Size		11		22 Depth Set				" Sac	ks Cement			
										·			
			1							·			
			 										
3/1 33/61	Test D	- ANG Since	ــــــــــــــــــــــــــــــــــــــ									<u> </u>	
			alisams Data	<u> </u>	Test Date		* Test Le		× The F			" Cag. Pressure	
Date New Oil M.G.			a Delivery Date Mark Test Date			1	" lest La	eng cas	" Tbg. Pressure		Cag. Francis		
" Choke Size		4	4 Oil				₫ Gas		. "AOF		" Test Method		
Choke Size			- 01		Water		- GM		AUF			- 1est Wierrod	
											ᆚ		
				Division have be emplete to the be			O ¹	II. CO	ONSERVAT	TON F	SIVIC	SION	
knowledge an		ÎL		·	·		•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Signature:	Sal	nth	lle			Approve	ed by: 급립G	INAL S	SIGNED BY JE	RRY SEX	(TOŅ		
Printed pame:	en Holle	~		Title:									
Titlet							Approval Date: JUN 2 3 1995						
Phone: 505-393-2727								JUN	23 630				
		-2727	<u> </u>										
" If this is a	change of o	perator fill in the	he OGRID z	number and na	me of the pre	vious spen	alor						

Printed Name

New Mexico Oil Conservation Division C-104 Instructions

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 fluie 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.
- Reason for filing code from the following table: NW New Well 3.

NW New Well
RC Recompletion
CH Change of Operator
AO Add oil/condensate transporter
CO Change eil/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
- 8. 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
 P Fee
 J Jicarilla
 N Navajo
 U Ute Mountain Ute
 I Other Indian Tribe 12.

13.

- The producing method code from the following table: Flowing
 Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a gas transporter 14.
- The permit number from the District approved C-129 for this completion 15.
- 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
- 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 no number the district office will assign a number and write it here. 20.
- Product code from the following table:
 O Oil
 G 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.)
- 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.
- 25. MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready o 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.
- 30. inside diameter of the well bore
- 31 Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and 32.
- 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/YR that gas was first produce: into a pipeline
- 38 MO/DA/YR that the following test was completed
- 37. Length 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 wells 39.
- 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:

Flowing Pumping Swebbin

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 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.

