District PO Box 198	90, Hobbe, N	VM 88241-15	980	State Of New Mexico Energy, Minerals and Natural Resources Department								Form C-104 Revised October 18, 1994 Instructions on back		
District III 1000 Rio Bi District IV		NM 88210 zlec, NM 8741 Santa Fe NM 8		01	'L CC	2040	RVATI 10 South Pi 11 Fe, NM							
	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT 1. Operator name and Address 2. OGRID Number													
Сн	IANCE	E PROF		•	name and A	Address			2. OGRID Number					
c/o OIL REPORTS & GAS SERVICES, INC.									1	004058				
P. O. BOX 755 HOBBS, NEW MEXICO 88241								3. Reason for Filing Code					g Code	
HC	JBBS,		IEXIC	0 882	41				<u>CO-</u>	EFFECTIVE 0	9/01 <u>/98</u>			
4. API Number 5. Pool 1 30-025-27488 LANGLIE MATTI						5. Pool Nam ATTIX						8. Pool Code 3724		
	7. Property	Code	8. Property Name E. F. KING					<u> </u>	9. Well Number #002					
002518			Locati		<u>E. F. r</u>	ling						π ΨΨΖ		
	a Section 31			Range Lot. Idn. Feet from						m the	East/West Line West		County Lea	
<u> </u>	11. Bottom H					50			h 600				Lea	
Ut or lot no	d Section 31			Lot. Idn. Feet from		rom the 650			h Line Feet from the 600		East/West Line West		County Lea	
на Сана Р	13 Professer			1. 0 /21/	es Dete		Presit Number		14 C-129 Bilocth		L	17. C-129 Espiera		
<u>Р</u> III.	<u>`</u>	and Ga		10/21/ nsporte					<u></u>		l			
18 Tm	unaporter GRID		19 Te	19 Transporter Name and Address				20 POD		21 O/G	22 POD ULSTR Location and Description			
				EXAS CRUDE OIL TRANSPORT, INC				0702510		0	, 	M-31-228-37E		
				MIT, TX 79745				0102010						
0223	345	Texi	aco Ex	aco Expl. & Prod. Inc.				0702530 G			M-31-22S-37E			
		P. (0. Box	3000				0702000 G						
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	23 POD							.coation and Description - 31 - 225 - 37E					<u> </u>	
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	25 Spud Da							TD 28 PBTD			29 Perforation	16	30 DHC, DOMC	
	31 Hole St	29	L	32 Casing & Tubing Size			Z9	33 Depth Set			 	24	Sacks Cement	
														
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VI. W	/ell Tes 35 Date Ner	st Data	Y	36 Gas Delivery Date 37				7 Test Date 38 Test Lei			39 Tbg. Pressu	ure	40 Csg. Pressure	
41 Choke Size				42 Oil			43 Weater	43 Water 44 G		A 5	45 AOF		46 Test Method	
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	ge and belief	f.		•		·		Approved by: ORIGINAL SIGNED BY CHBIS WILLIAMS						
Signature: Duje Heard														
Printed Nefme: () GAYE HEARD														
								Approval Date: AUG 2.5 1890						
Date:			Phone: (505) 393-2											
47 If this i	08/10/ is a change of	/98 of operator fi	ill in the OGF	RID number /			L		<u></u>					
			• -				Printed Nam						<u> </u>	
	Previous Of	perator Signe	, ture				Printed Nam	e			Title		Date	

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 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.

- Operator's name and address 1.
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- 3.

 - Reason for filing code from the following table:

 NW
 New Well

 RC
 Recompletion

 CH
 Change of Operator (Include the effective date.)

 AO
 Add oil/condensate transporter

 CO
 Change oil/condensate transporter

 CG
 Change oil/condensate transporter

 CG
 Change 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
- 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 12

 - SP-
 - J N U
- Federal State Fee Jicarilla I Navajo I 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 transporter
- 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 completion 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: 0 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 POP has su number the district office will essign 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 Tank", etc.) 24.
 - 25. MO/DA/YR drilling commenced
 - MO/DA/YR this completion was ready to 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.
 - 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. 30.

- 31. Inside diameter of the well hore
- 32. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom. 33.
- 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.

- MO/DA/YR that new oil was first procuced 35.
- 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
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41. Diameter of the choke used in the tea
- 42. Barrels of oil produced during the test
- 43. Barrels of water produced during the test
- 44. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 45.
- 46. The method used to test the well:
- Flowing Pumping Swabbing
 - If other method please write it in.
- The signature, printed name, and itle of the person authorized to make this report, the date this report was signed, and the telephone number $t_{\rm P}$ 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 48.

