District I PO Box 1960, Hobbs, NM 88241-1960

State of New Mexico

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

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

District III

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

X AMENDED REPORT

1000 Rie Branes Rd., Aziec, NM 87410 District IV

PO Box 2068, Santa Fe, NM 87504-2088

REQUE	ST FOR ALLOWABLE AND AUTHORI	ZATION TO TRAI	NSPORT		
Chance Proper	Operator name and Address ties ts & Gas Services. Inc.	* OGRID Number 004058			
c/o Oil Reports & Gas Services, Inc. P. O. Box 755 Hobbs, N.M. 88241		Reason for Filing Code As Per OCD Ed Martin To Correct Land Type			
⁴ API Number 30 - 025-27488	'Pool Name Langlie Mattix SR-QU-GB		* Pool Code 37240		

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Н	obba, N	r.m. 88	241				1	To Corre			
4 A	PI Number				Pool Naz	me		10 COLIC	7	' Pool (Code
30 - 025-2		1	Lang	glie Matti	x SR-QU-GE					37240	
¹ Pr	operty Code				Property N	iame			' Well Number		
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10 (Surface	Location		·		· · · · · · · · · · · · · · · · · · ·					
I or lot mo.	Section	Towaship	Range	Lot.lda	Feet from the	North/Sou	th Line	Fost from the	East/West	line	County
L	31	225	37E		1650	Sout	h	600	West		Lea
11]	Bottom	Hole Loc	ation	<u> </u>							
UL or lot no.	Section	Towaship	Range	Lot Ida	Feet from the	North/Sou	th line	Feet from the	East/West	line	County
L	31	225	37E		1650	South		600	West	:	Lea
12 Lee Code	13 Produc	ing Method C	ode 14 Gas	Connection Date	" C-129 Per	mit Number	14 C-129 Effective De		Date	" C-129 E	Expiration Date
P		P		10-21-81							
I. Oil a	nd Gas	Transpor	ters								
"Transpo OGRID		31	Transporter		36 E	OD	31 O/G	22 POD ULSTR Location and Description			•
OGRAD		Scurlo		ian Corp	07025	510	0			,	
02044			Box 4648	_			· ·				
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0223	45	Texaco	Explor	. & Prod.	Inc 07025	530	G				
Market			Box 300			21 23 LB					
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V. Prod	wood W	lates									
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/. Well	Comple	etion Date	a								
	pud Date		¹⁴ Ready	Date	" TD	Т		™ PBTD		" Pe	riorations
	-		·			l l			ı		

02234		xaco Explor. 0 0. Box 3000 1sa, OK 74102	& Prod.	1300	2530	G			
	and Water			\$1960 G				······································	
IV. Produ	ced Water			n bd	DD ULSTR Loca	tion and Dec	eription		
V. Well	Completion	Data							
	ed Date	34 Ready Dat	•	27 *	TD		" PBTD		3º Perforations
	M Hole Size	31 Ca	sing & Tubi	ng Size	3	Depth Set			35 Sacks Cement
VI. Well	Test Data								
H Date ?	lew Oil	³⁶ Gas Delivery Date	» Т	est Date	³⁷ Test L	ength	H Tbg.	Pressure	³⁰ Cag, Pressure
" Chol	e Size	41 Oil	43	Water	◆ G	LS	. " /	OF	" Test Method
4 I hamby set	ify that the rules	of the Oil Conservation, Di	vision have b	een complied					

M Date New Oil	Mas Delivery Date	[™] Test Date	7 Test Length	³⁴ Tbg. Pressure	26 Cag. Pressure		
" Choke Size 41 Oil		4 Water	* Gas	, " AOF	4 Test Method		
with and that the information knowledge and belief Signature:	es of the Oil Conservation Divi	te to the best of my	Approved by: ORIGINAL SIGN	NSERVATION DI			
Tide: Age	·		Approval Date: JUN 2 3 1995				
Date: 6-21-95	Phone: EO	5-393-2727					

Previous Operator Signature Printed Name

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 bar

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 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

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) request for test anowable (module vi-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
 S State
 P Fee
 J Jicarilla 12.

Navajo Ute Mountain Ute Other Indian Tribe

- 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 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 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 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 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. well comple (Example: " Tank",etc.)
- MO/DA/YR drilling commenced 25.
- 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. Inside diameter of the well bore
- 31. Outside diameter of the casing and tulling
- 32. Depth of casing and tubing. If a casin; liner show top and
- 33. Number of sacks of cament 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.

- 34. MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produce I into a pipeline
- MO/DA/YR that the following test was completed 36.
- 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 tes
- 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 Swabbin

If other method please write it in.

- The signature, printed name, and little 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.

