District & PO Box 1996 Hobbs, NM **88241-1986** District II

State of New Mexico

Revised February 10, 1994

NO Drawer DD. Artenia, NM 88211-0719 OIL CONSERVATION DIVISION PO Box 2088 District III

Instructions on back Submit to Appropriate District Office
5 Copies

1000 Rie Brazes District IV PO Bex 2008, S					Fe, NM 8		-2088			☐ AM	ENDED REPORT			
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				me and Addres						' OGRID Num				
Exxon Corporation Attn: Permitting P.O. Box 4358							007673							
	Houston, TX 77210-4358							Reason for Filing Code						
Cg effective 9/1/98														
*API Number										' Pool Code				
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04202	roperty Coc	ie	N C	erty Na	erty Name			' Well Number						
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12 Lee Code	13 Produ	cing Method C	ode 14 Gar	Connection De	! ite '* C-I	29 Perm	it Number		C-129 Effective	Date "C	-129 Expiration Date			
РР									, i					
III. Oil and Gas Transporters											·			
11 Transpe	rier		" Transporter			²⁴ PO	D	²¹ О/G		POD ULSTR				
	OGRID		and Address			5000			and Description					
100				Service:				G	A-13-22S-37E					
			00 Louisiana Ste 5800 uston, TX 77002						N.G. Penrose T/B #1					
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ng Barti nisis		P.O. Box 159			× × ×				same as	same as gas				
St. Carlottane Co. Caller		Artesia, NM 88211-0159			- Similar				<u> </u>		·			
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IV. Prod	iuced V	Vater							<u> </u>					
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7 7/8			5 1/2		<u>-</u>					2200				
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2-25-99					2-26-99		24							
" Choke Size			4 OI		⁴ Weter		4 Gm		~ AOF		" Test Method			
			55.0 0			I		103		Pumping				
	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								OIL CONSERVATION DIVISION					
knowledge and belief.							Origina Signed by							
Signature: allier hypor							Paul Kaur							
Printed came: Allison Myrow							Title: Geologist							
Title: St. Office Assistant							Approval Date: SEP 0 8 1999							
Date: 8/	Date: 8/27/99 Phone: (713) 431-1213													

Provious Operator Signature

Printed Name-

New Mexico Oil Conservation Divi C-104 Instructions

IT 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

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

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.
- 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 on transporter 3.

AG CG

New Well
Recompletion
Change of Operator
Add oil/condensate transporter
Change oil/condensate transporter
Add gas transporter
Change gas transporter
Change gas transporter
Request for test allowable (Include volume remested) RT requested)

If for any other reason write that reason in this box.

- 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: 12.

State Fee Jicarilla

Navejo 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.
- 15 The permit number from the District approved C-129 for
- 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
- 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:
 O Oil
 G Gas 21.

- The ULSTR location of this POL 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 Tank", etc.) 24.
- 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
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. Inside diameter of the well bore
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and bottom. 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 produced 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 well **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
- Gas well calculated absolute open flow in MCF/D
- 45. The method used to test the well:

Flowing

P Pumping
S Swabbing
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 46. about this report
- 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