## District I PO Box 1980, Hobbs, NM 88241-1980 District II 811 South First, Artesia, NM 88210 District III

## State of New Mexico Energy, Minerals & Natural Resources Department

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

5 Conies

OIL CONSERVATION DIVISION

1000 Rio Brazo: District IV 2040 South Pacl			-		Fe, NI						AME	NDED REPORT	
I	RI	OUEST	Operator nam	LOWABI	E AND	AUI	THORIZ	ZATIO	ON TO TR. 019174	2 OGRID		·	
RICE OPERATING COMPANÝ 122 WEST TAYLOR HOBBS, NM 88240											Reason for Filing Code 8-1-98		
<sup>4</sup> API Number <sup>5</sup>						Pool Name SAN ANDRES - GLORETTA				*Pool Code 096111			
'Property Code 009617			<del> </del>				perty Name			Well Number			
	Surface I	ocation											
Ul or lot no.	Section 02	Township 26S	Range 37E	Lot.Idn	Feet from the 1980	he	North/Soi N	ith Line	Feet from the 660	East/Wes	t line	County · 25	
		Hole Loca			1700				- 000	<u> </u>		23	
UL or lot no.	Section	Township	Range	Lot Idn	Feet from t	lhe	North/So	uth line	Feet from the	East/Wes	ast/West line Cou		
12 Lse Code S	<sup>13</sup> Producia SWD	ng Method Cod	le <sup>14</sup> Gas (	Connection Date	15 C-1	29 Perm	it Number	1	C-129 Effective	Date	e 17 C-129 Expirati		
III. Oil a	nd Gas T	ransporte	ers										
18 Transpo OGRII		19 1	" Transporter Name and Address			³ POD		<sup>31</sup> O/G	<sup>22</sup> POD ULSTR Location and Description				
037008	1	ENEX OP				2809388 0		0					
	800000000000000000000000000000000000000	O BOX 30		<u> </u>									
012426 MACLASKEY OILFIELD SERV. INC PO BOX 580 HOBBS, NM 88241						28093	388	0					
130009	2809:	388											
130908 PATE TRUCKING COMPANY PO BOX 1008 HOBBS, NM 88241						2009.		Ω					
IV. Prod	uced Wa	iter											
2	POD		-		24	POD U	LSTR Loca	tion and l	Description				
V. Well		ion Data											
25 Spud Date		26 ]	*Ready Date ** 7			<sup>11</sup> PBTD		TD	19 Perforations			³ DHC, DC,MC	
	31 Hole Size			32 Casing & Tubing Size			3	3 Depth S	et		34 Sac	34 Sacks Cement	
										•			
VI. Wel					·		· · · · · ·						
<sup>35</sup> Date New Oil <sup>36</sup> Ga		<sup>34</sup> Gas D	Delivery Date 37 Te		est Date		34 Test Length		" Tbg. Pressure			4 Csg. Pressure	
41 Choke Size			<sup>43</sup> Oil <sup>43</sup> W <sub>8</sub>		Vater	er			45 /	OF	OF "Test Method		
47 I hereby ce with and that knowledge an	the informatio	ules of the Oil ( n given above i	Conservation D	ovision have been aplete to the best of	n complied of my		C	OIL CO	ONSERVA	TION I	SIVIC	SION	
Signature:	Appro	Approved by: ORIGINAL SIGNED BY CHRIS WILLIAMS											
Printed name: Ken Hasten -							Title: DISTRICT I SUPERVISOR						
Tide: General Manager						Approval Date: ALIC 1 6 1998							
Date: Phone: (505) 393-9174								.71					
" If this is	a change of o	perator fill in t	he OGRID nu	mber and name	of the previ	ious oper	rator						
	Previous	Operator Sign	nature	_	······································	Pri	nted Name			Т	ītle	Date	

## New Mexico Oli Conservation Divisio 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.

- 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 (Include the effect

  AO Add oil/condensate transporter

  CO Change oil/condensate transporter

  AG Add gas transporter

  CG Change gas transporter

  RT Request for test allowable (Include 3.
- New Well
  Recompletion
  Change of Operator (Include the effective date.)
  Add oil/condensate transporter
  Change oil/condensate transporter
  Add gas transporter
  Change gas transporter
  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
- The name of the pool for this completion 5.
- 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 12.

  - Fee Jicarilla
  - Ŋ
  - Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: F Flowing E Pumping or other artificial lift 13.
- 14. MO/DA/YR that this completion was first connected to a gas transporter
- The permit number from the District approved C-129 for this completion 15.
- 16. MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this 17. completion
- The gas or oil transporter's OGRID number 18
- 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 21.
  - O 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.) 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.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 26.
- Total vertical depth of the well 27.

- 31. Inside diameter 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
- 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 t. 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: Flowing Pumping Swabbing 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 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.