

District I
PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104
Revised February 10, 1994

District RC
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd., Aztec, NM 87410

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

Instruction on back
Submit to Appropriate District Office
5 Copies

District IV
PO Box 2088, Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address ARCH PETROLEUM INC. 10 DESTA DRIVE, STE. 420E Midland, TX 79705		² OGRID Number 000962
		³ Reason for Filing Code CHANGE OF POD EFFECTIVE 4-1-96
⁴ API Number 30-025-22446	⁵ Pool Name <i>Paddock</i> TEAGUE BLINEBRY	⁶ Pool Code 58300
⁷ Property Code 014898	⁸ Property Name C. E. LAMUNYON	⁹ Well Number 28

II. ¹⁰ Surface Location

Ul or Lot. No. N	Section 22	Township 23S	Range 37E	Lot Idn.	Feet from the 660	North/South Line SOUTH	Feet the 1780	East/West Line WEST	County LEA
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¹¹ Bottom Hole Location

Ul or Lot. No.	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet from Line	East/West Line	County
¹² Lse Code F	¹³ Producing Code P	¹⁴ Gas Date 1/92	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
007440 37480	EOTT ENERGY PIPELINE LTD. PARTNERSHIP, P. O. BOX 1660 MIDLAND, TX 79702	709610	O	
020809	SID RICHARDSON 201 MAIN ST. FORT WORTH, TX 76102	709730	G	

IV. Produced Water

²³ POD 709650	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

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 knowledge and belief.

Signature: *Bobbie Brooks*

Printed Name:
BOBBIE BROOKS

Title:
PRODUCTION ANALYST

Date:
APRIL 16, 1996

Phone:
915-685-1961

OIL CONSERVATION DIVISION

Approved by: **ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR**

Title:

Approved Date:

APR 19 1996

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED
"AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.026 PSIA at 60°.

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 recompletable 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 filled for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

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.

Reason for filling code from the following table:

RT Request for test allowable (include volume requested)
CG Change gas transporter
AG Add gas transporter
CO Change oil/condensate transporter
AO Add oil/condensate transporter
CH Change of Operator
RC Recompletion
NW New Well

The API number of this well

The name of the pool for this completion

The pool code for this pool

The property code for this completion

The property name (well name) for this completion

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.

The bottom hole location of this completion

Lease code from the following table:

F Federal
S State
P Private
J Judicial
U Navajo
N Navajo
U Navajo
I Other Indian Tribe

The producing method code from the following table:

P Flowing
F Pumping or other artificial lift

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

MO/DA/YR of the C-129 approval for this completion

MO/DA/YR of the expiration of C-129 approval for this completion

The gas or oil transporter's OGRID number

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.

Product code from the following table:

O Oil
G Gas

47.

46.

45.

44.

43.

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22.

The previous operator's name, the signature, printed name, and title of the previous operator, the date this report was signed, and the telephone number to call for questions about this report

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

The method used to test the well:
Flowing
Pumping
Swabbing
If other method please write it in.

Gas well calculated absolute open flow in MCF/D

MCF of gas produced during the test

Barrels of water produced during the test

Barrels of oil produced during the test

Diameter of the choke used in the test

Shut-in casing pressure - oil wells

Shut-in tubing pressure - oil wells

Length in hours of the test

MO/DA/YR that the following test was completed

MO/DA/YR that gas was first produced into a pipeline

MO/DA/YR that new oil was first produced

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.

Number of sacks of cement used per casing string

Depth of casing and tubing. If a casing liner show top and bottom.

Outside diameter of the casing and tubing

Inside diameter of the well bore

Top and bottom perforation in this completion or casing shoe and TD if openhole

Plugback vertical depth

Total vertical depth of the well

MO/DA/YR this completion was ready to produce

MO/DA/YR drilling commenced

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.)

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.

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.)