PO Box 1980, Hobbs, I District II PO Drawer DD, Artesi District III 1009 Rio Brazos Rd., J District IV	ia, NM 88211-071 Aztec, NM 87418	• 0	State of New Mexico Energy, Minerain & Natural Resources Department OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088					Form C-10 Revised February 10, 199 Instructions on bac Submit to Appropriate District Offic 5 Copie AMENDED REPOR			
PO Box 2088, Senta Fe I.		T FOR A	LLOWAF	BLE AN	ם אני	THORIZAT	TON TO TH				
SMI	TH & MAR	' Operator and	me and Address	6				¹ OGRID Num			
Ρ.Ο.	. BOX 86	3	•					0989 Reason for Filing	- C-de		
	міт, тх	79745					CO-EFFEC		-		
API Nur 30 - 025-283		SC	וחפספר		Pool Name	SEVEN R	!		Pool Code		
' Property			ARDUNUU		PES &		17582	555	560 Well Number		
19427			WILI	LS FEDE					8		
II. ¹⁰ Surfa Ul or iot no. Sectio	ace Location		Lot.Ida	Feet from t							
			LOLIUN		the .	North/South Line	Feet from the	East/West line	County		
A 33	3 26S			330	l	NORTH	330	EAST	LEA		
UL or lot no. Section			Lot Ida	Feet from	the	North/South line	Feet from the	East/West line	County		
¹¹ Lae Code ¹³ Pr	roducing Method (Code 14 Gas	Connection Dat	- I " C-	129 Permit		¹⁴ C-129 Effective				
F	P				129 Fer-	Number	" C-IZY Editary	Date	-129 Expiration Dat		
III. Oil and G	ias Transpo	Transporter 1	, ,			1 1 0/6	· ······				
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	201 MAIN	N, STE.	2700	12.	<u>26063(</u>		A-33-20	S-37E			
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V. Produced	Water			Signification Signification Signification							
18. mata pala para di Santa Manazarta	Water			Signification Signification Signification		Longer and the second					
IV. Produced ³³ POD V. Well Com	pletion Dat			24	POD ULS		Description				
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IV. Produced ³³ POD V. Well Com	pletion Dat	²⁴ Ready D	Date Casing & Tubin	24	POD ULS		Description ²³ PBTD	" Sa	²¹ Perforations cks Cement		
V. Well Com	pletion Dat	²⁴ Ready D		24	POD ULS	TR Location and	Description ²³ PBTD	³³ Sav			
IV. Produced ³³ POD V. Well Com ¹⁴ Spud Date	pletion Dat	²⁴ Ready D		24	POD ULS	TR Location and	Description ²³ PBTD	³⁴ Sav			
IV. Produced ³³ POD V. Well Com ³⁴ Spud Date	pletion Dat	²⁴ Ready D		24	POD ULS	TR Location and	Description ²³ PBTD	³³ Sa.			
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	New Maxico Oil Co C-104 In	onservation (structions	Division
IF TH "AME	IS IS AN AMENDED REPORT, CHECK THE BOX LABLED NDED REPORT" AT THE TOP OF THIS DOCUMENT	22.	The I well
Report Report	t all gas volumes at 15.025 PSIA at 60°. t all oil volumes to the nearest whole barrel.	23.	(Exar The P
A requ accon	lest for allowable for a newly drilled or despaned well must be spanied by a tabulation of the deviation tests conducted in sance with Rule 111.	.23,	from this numi
All sec new a	ctions of this form must be filled out for allowable requests on nd recompleted wells.	24.	The (well) (Exar
cnang	t only sections i, ii, iii, iV, and the operator certifications for as of operator, property name, well number, transporter, or such changes.	.25.	Tank MO/I
	arate C-104 must be filed for each pool in a multiple	26.	мол
compl	stion.	27.	Total
Improp operat	perly filled out or incomplete forms may be returned to ors unapproved.	.28.	Plugt
1.	Operator's name and address	29.	Top shoe
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.	Insid
3.	Reason for filing code from the following table:	31.	Outs
N F C A C A C F	NW New Well RC Recompletion CH Change of Operator	32.	Dept botto
	AO Add oil/condensate transporter CO Change oil/condensate transporter	33.	Num
	AG Add gas transporter CG Change gas transporter RT Request for test allowable (include volume	The following conducted on	
	requested) If for any other reason write that reason in this box.	-34.	MO/I
4.	The API number of this well	35.	MO/I
5.	The name of the pool for this completion	36.	мол
6 .	The pool code for this pool	37.	Leng
7.	The property code for this completion	38.	Fiow Shut
8.	The property name (well name) for this completion	39.	Flow
9.	The well number for this completion		Shut
10.	The surface location of this completion NOTE: If the	40.	Diam
	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.	41.	Barre
11.	The bottom hole location of this completion	42.	Barre
12.	Lease code from the following table:	43.	MCF
	F Federal	· 14 .	Gas
	S State P Fee J Jicarille N Navajo	45.	The F P S
	U Ute Mountain Ute I Other Indian Tribe		lf ot

- 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 transporte
- 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. completion
- 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.

- ULST:, location of this POD if it is different from the completion location and a short description of the POD imple: "Battery A", "Jones CPD",etc.)
- POD number of the storage from which water is moved n this property. If this is a new well or recompletion and POD has no number the district office will assign a ober and write it here.
- ULSTR location of this POD if it is different from the completion location and a short description of the POD imple: "Battery A Water Tank", "Jones CPD Water k",etc.)
- DA/YR drilling commenced
- /DA/YR this completion was ready to produce
- al vertical depth of the well
- back vertical depth
- and bottom perforation in this completion or casing a and TD if openhole
- de diameter of the well bore
- side diameter of the casing and tubing
- th of casing and tubing. If a casing liner show top and om.
- nber of sacks of coment used per casing string

; test date is for an oil well it must be from a test ily after the total volume of load oil is recovered.

- DA/YR that new oil was first produced
- /DA/YR that gas was first produced into a pipeline
- /DA/YR that the following test was completed
- gth in hours of the tes
- ving tubing pressure oil wells it-in tubing pressure gas wells
- ving casing pressure oil wells it-in casing pressure gas wells
- meter of the choke used in the test
- els of oil produced during the test
- rels of water produced during the test
- F of gas produced during the test
 - well calculated absolute open flow in MCF/D
- method used to test the well: Flowing Pumping Swebbing

 - 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 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.

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