District I PO Box 1980, Hobbs, NM \$8241-1980

State of New Mexico
Mineral & Natural Resources Department

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

District II 20 Drawer DD, Artesia, NM 88211-6719 District III

OIL CONSERVATION DIVISION PO Box 2088

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Operator name and Address Marks and Garner Production, LTD. Co.										1 OGRID Number		
c/o Oil Reports & Gas Services, Inc.,								To add I/ID 'Resea for			Cada	
P. O. Box 755 Hobbs, New Mexico 88241								to operator	to operator name. Requested Ogrid #			
							pol Name			Pool Code		
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11 Lee Code	15 Produc	ing Method Co	de "Gas	Connection D	ate '	* C-129 Perm	it Number	14 C-129 Effective	Date	" C-1	29 Expiration Date	
F	<u> </u>	P		5/04/85								
		Transpor										
"Transporter OGRID			" Transporter Name and Address				D ¹¹ C	y G	12 POD ULSTR Location			
FOU		OIT Energy							and Description			
		P. O. Box 1188				127311		F-22	F-22-24S-32E			
Houston		ibuston, Te	Texas 77251-1188									
009171 GPM Gas		PM Gas C	Corp.			127315		F-22	F-22-24S-32E			
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15	POD					₽ POD U	LSTR Location s	and Description				
								•				
V. Well	Comple	tion Data			·	·						
u s _i	pud Date		" Ready I	ate		" TD		≝ PBTD		31	Perforations	
M Hole Size		*	H Casing & Tubing Size				²⁶ Depth Set			³⁶ Sacks Cement		
					 		* * * * * * * * * * * * * * * * * * *					
		'' '' '' '' '' '' '	1									
VI. Well	Test D	ata	1			1	·····		····			
Date New OR							" Test Length	M The.	M Tog. Pressure N Cag. P			
" Choke Size		•	4 Oil 4 Water		Water	" Gas		* ^	" AOF		4 Test Method	
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" I hereby cer	uly that the	rules of the Oil	Conservation	Division have b	een comp	lied		00110			70);	
with and that the knowledge and		on given above	II UTUG AAR COI	mpicts to the be	at of my		OIL (CONSERVA	TON I)IVIS	ION	
Signature:	\rightarrow	en 8	DVV.	•		Арргоч	red by:				34	
Printed same:							Title:					
Laren Holler							Approval Date:					
Agent Phone:							U. 196 C 3 (1975					
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 	Previou	Operator Sign	alure			Pris	ted Name	<u> </u>	Т	itle	Date	
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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

 AO Add oil/condensate transporter

 CO Change oil/condensate transporter

 AG Add gas transporter

 CG Change gas transporter 3.

NW RCHOOGG

CG Change gas transporter
RT 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
- 5. The name of the pool for this completion
- 6. The pool code for this pool
- 7. The property code for this completion
- The property name (well name) for this completion 8.
- 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.

Federal State Fee Jicarilla

- Navajo Ute Mountain Ute Other Indian Tribe
- 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.
- 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 completion 17.
- 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 POD if it is different from the well completion location and a short description of the POD (Example: "Bettery 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",ets.) 24.
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- Plugback vertical depth
- 29. Top and bottom perforation in this completion or casing shoe and TD if openhole
- 30. incide diameter of the well bore
- 31. Outside diameter of the casing and tubing
- 32. Depth of casing and tubing. If a casing liner show top and
- 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.

- 34 MO/DA/YR that new oil was first produced
- 35. MO/DA/YR that gas was first produced into a pipeline
- 36. MO/DA/YR that the following test was completed
- 37 Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- 39. Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
- 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
- 44 Gas well calculated absolute open flow in MCF/D
- The method used to test the well:

 F Flowing
 P Pumping
 S Swabbing 45

S Swapping
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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