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 II

District III

PO Drawer DD, Artesia, NM 88211-0719

Instructions on back Submit to Appropriate District Office 5 Copies

1000 Rie Brazes Rd., Aztec, NM \$7410

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

District IV PO Box 2008, 8	lanta Wa 3	VIA 97504.200	•		,							ENDED REPORT		
I.				LLOWA	BLE AN	ID AU	THOR	TASE	ION TO TE	RANS	PORT	•		
MNA FNT			Operator na	me and Addre	***						ID Numb			
MNA ENTERPRISES LTD CO. c/o OIL REPORTS & GAS SERVICES, INC.									124768					
POST OF	FICE	BOX 755					3	Reason f	or Filing	Code				
HOBBS,	NEW M	EXICO 88	3241		•			J.	CH EFFECT	ידעד מ	12/01	/96		
i	PI Numb	-			Pool Name 'Pool Code									
30 - 0 25-09741 LANGLIE M							ATTIX SR=OU-GB				37240			
18463	roperty Co	ode	Prope				perty Name				' Well Number			
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II. 10 Surfac		e Locatio		T										
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III. Oil a	nd Gov	P		04/28/6	7			<u> </u>						
Transpor		s Transpo	" Transporter	Nama		²⁰ PO		24 O/G		1 202				
OGRID		and Address				FOD			DOD ULSTR Location and Description					
007440		EOTT ENERGY				11628	LO	0	M-12-25S-36E					
		Post Office Box 1660 Midland, Tx 79702							12 238 301					
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¹¹ Spud Date		¹⁴ Ready Date				" TD			" PBTD		3º Perforations			
														
* Hole Size		1e	31 Casing & Tubing S		ing Size	Size 3		Depth Set		²² Sacks Cement				
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M Date New Oil		³⁴ Gas	Delivery Date	™ T	³⁶ Test Date		" Test Length		3 Tbg. Pr	casure	ure ³⁶ Csg. Pressure			
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" Choke Size			41 Off		4 Water		4 Gas		* AC	F	" Test Method			
"I hereby certi	fy that the	rules of the O	il Conservation I e is true and com	Division have be	cen complied		<u> </u>	W 00	NOEDILLO					
knowledge and	belief.				it or my		O.	IL CO	NSERVAT	ION I	DIVIS	ION		
Signature:	Kar	en H	aller k	KA-Sh		Approve	d by:	NGINA:	Clours -					
Printed name: LAREN HOLLER							Title: DISTRICT SUPERVISOR							
Title: AGENT			HODDER	Approval Date: FEB 28 195										
Date: 02/1	16/96	AGENT	Phone: (505) 393	3-2727				-000 83	<u> </u>				
	· ·	aneretes fill i-	ம் OGRID au			<u></u>								
SIDNEY			MAD ON	Mellerb	A Arzh	ious opera LAREN		₹R		7.0	GENT	02/16/96		
		a Operator Si) = -U(-/U	77.		d Name				rje 31.14.1.	02/16/96 Date		
			OLD O	GRID #02	0812									

New Mexico Oli Conservation Division 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 necreet 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 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.

- Operator's name and address 1.
- 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 ges transporter

 RT Request for test allowable (includensated) 3.

Change gas transporter Request for test allo requested) for test allowable (include volume

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

- The API number of this well Δ.
- The name of the pool for this completion 5.
- The pool code for this pool 6.
- The property code for this completion
- The property name (well name) for this completion 8.
- The well number for this completion 9.
- 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.
- The bottom hole location of this completion 11.
- Lease code from the following table:
 F Federal
 S State
 P Fee
 J Jicarilla
 N Navajo
 U Ute Mountain Ute
 I Other Indian Tribe 12.

- The producing method code from the following table: 13 Flowing Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a 14. gas transporter
- 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.
- 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
 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: "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
- Plugback vertical depth 28.
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 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.

- MO/DA/YR that new oil was first produced 34.
- 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.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 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
- 44. Gas well calculated absolute open flow in MCF/D
- The method used to test the well: 45.

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 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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