District I PO Box 1980, Hobbs, NM 83241-1980 District II NO Drawer DD, Artesia, NM 83211-0719 District III 1000 Rio Branos Rd., Axtoc, NM 87410 District IV					VATION Box 2088	lew Mexico and Resources Department ATION DIVISION ox 2088 M 87504-2088			Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies				
PO Box 2083, 5	lanta Fe, l	M \$7504-2081 REQUES	T FOR A	FOR ALLOWABLE AND AUTHORIZATI						ION TO TRANSPORT			
CHANCE			• Operator m	Operator name and Address						³ OGRID Number			
			s Servic	Services, Inc.					004058				
P. O. E Hobbs,	Box 75	5							³ Reason for Filing Cods				
the second se	PI Numb								со	00/01/90			
30 - 025-0	09823			Ja	' Pool Name Tansill !	nsill Yates SR			⁴ Pool Code 33820				
	roperty Co	de			* Property Na	Property Name			' Well Number				
0025		Brown						2					
II. ¹⁰ Surface Loc		Towaship		1									
				Lot.Idn Feet 1		from the	North/Se	outh Line	Feet from the	East/We	st line	County	
D	25	255				330	30 North		825		West Lea		
UL or lot no.	Section	Hole Lo		<u></u>							¢		
		Township	Range	Lot Idn	Feet	from the	North/South line		Feet from the East/V		West line County		
D "Lee Code	25	255			3:		Nort		825	West		Lea	
	" Produ	icing Method (Code ¹⁴ Gas	Connection	Date	" C-129 Permi	t liumber		C-129 Effective				
		<u>s</u>	12,	/21/75									
III. Oil al	nd Gas	Transpo	ITERS "Transporter										
OGRID	nuer				^µ POI	2	" 0/G			D ULSTR Location			
012852	к	and Address KOCH OIL COMPANY							and Description				
MARKAGE WASHING		. О. вох	2256			0701810		0	D-25-2	5S-36E	-36E		
WICHITA, N			and the second se	KS 67201-2256									
020809	11	id Richard st City Ba	lson Gasoli mk ^f rann	son Gasoline Co.			0701830 G			D-25-25S-36E .			
	2	01 Main St	The Tower			Service States	APPENDEN AND AND AND AND AND AND AND AND AND AN			D-23-255-36E .			
ALL CALLS AND ALL CALLS	E SERVICE	ort worth	i, 1X 76102					a.a.a.te					
IV. Produ	iced W	ater											
IV. Produced Water "POD "POD ULSTR Location and Description													
								ou rud De	acripuos				
V. Well C	Comple	tion Data											
				²⁴ Ready Date			TT "		" PBTD		10 m. c		
					10			TDID		1º Perforstions			
³⁴ Hole Size			" C	²¹ Casing & Tubing Size			³⁴ Depth Set						
			1				Depth Set			²⁰ Sacks Cement			
·····			1										
177 117 11 -													
VI. Well 7													
			divery Date * Test D		Col Date	N	Test Length		³⁴ Tbg. Pressure		3º Cag, Pressure		
" Choke	Size	41	OU	4 Water			^d Gu		" AOF		" Test Method		
" I hereby certify	that the m	ules of the Oil	Conservation Di	servation Division have been complied									
										SERVATION DIVISION			
Signature:		Harc	1		Ammund								
Printed name:	My ~	JACULIC	<u> </u>			Approved	Approved by:						
	Tide:	Title:											
Tide: MA	NAGER					Approval I	Approval Date: Addition 0. 0. 4000						
D	5/22/9	96	Phone: 50	5-393-2	727		MAY 2 3 1996						
Date: 05/22/96 Phone: 505-393-2727 " If this is a change of operator fill in the OGRID number and name of the previous operator													
	Previous (Operator Signa	ture			Printed	Name			Tide			
di da an di katar	<u></u>		En alizzationen a							9176		Date	

anP

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT Report sil gas volumes at 15.025 PSIA at 60°. Report sil oli volumes te the nearest whole barrel. A request for allowable for a newly drilled or despend well must be accompanied by a tebulation 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 ol/condensate transporter CO Change oli/condensate transporter CG Change oli/condensate transporter CG Change gas transporter RT Request for test allowable (include volume requested) If for any other reason write that reason in this box.
 - If for any other reason write that reason in this box.
- The API number of this well ۵.

3.

- 6. The name of the pool for this completion
- 8. 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 8 State P Fee J Jicarilia 12.
 - 8 P J

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- 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 gas transporter 14.
- 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 completion 17.
- 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.

- 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
- MO/DA/YR this completion was ready to produce 26.
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- 30. inside 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 bottom.
- Number of sacks of cement used per casing string 33.

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.
- 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
- 45. The method used to test the well:
 - Flowing

 - r Plowing 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.