PO Box 1980, Hobbs, NM \$2241-1980 District II

State Of INC. . . AICO

Energy, Minerals & Natural Resources Department

Lotm C-104 Revised February 10, 1994

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

OIL CONSERVATION DIVISION

Instructions on back Submit to Appropriate District Office

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1000 Rie Braze	s Rd., Aziec	, NM 87418	PO Box 2088 Santa Fe, NM 87504-2088								•	5	5 Copi
District IV				Santa	re, M	M 8/304	1-2088	\$		Г	T AM	ended r	מטמשי
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		<u> </u>	Operator a	une and Addre	BEE A	IND AC	THU	CLA1	ION TO TI				
1	PROPER						¹ OGRID Number 004058						
	1 Repor Box 755	ts & Ga	s Servic					Reason for Filing Code					
1	NM 882	41							СО	06/0	1/06		
30 - 025-	API Number			⁴ Pool Name						CO 06/01/96 *Pool Code			
L	roperty Code			tix SR-QU-GB				37240					
0025			Federal "B"				794			' Wall Number			
II. 10 Surface Location										2			
Ul or lot Bo.	r lot no. Section Ter				Feet fro	m the	the North/Son		Feet from the	Fast/V	Vest line	Cour	
н	14	255	37E	:	1	.650 North			330	1 1		Lea	ц
11	Bottom 1	Hole Lo	cation				330	ngsc nea					
UL or lot no.	Section	Towaship		Let Ida Fee		from the North/		outh line	Feet from the	East/West line		Cous	aty ·
Н	14	25S 37			_1	1650 No.		rth	330	East		Lea	•
11 Lac Code	¹⁵ Produci	ng Method C	ode ^M Gas	" Gas Connection Date		C-129 Perm	nit Number		C-129 Effective	Date	" C-1	129 Expiratio	a Date
	F		2/4/59										
III. Oil a		Transpor	Transporter		······································								
OGRID				¹¹ POD ¹¹ O/G			22 POD ULSTR Location and Description						
012852	кос	CH OIL C	COMPANY			0702310		0	H-14-25S-37E				
		P. O. BOX 2256				Medical	(4) 8(5) 89	30.40%	. :				
02000	Si	WICHITA, KS 67201-2256 Sid Richardson Gasoline Co.					erana de la comoción	**************************************					
020809	1s	1st City Bank Tower						G	A-14-25S-37E				
	Fc	Fort Worth, TX 76102								•			
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A PROPERTY OF	AS 1533 AND 123				Sur.		(र्श्वरहरू	Maria kalifa					
V. Produced Water									· · · · · · · · · · · · · · · · · · ·				
POD						** POD ULSTR Location and Description .							
		_							wenpus .				
		ion Data								********			
Spud Date			M Ready D	" TD			" PBTD		" Perforations				
		31 Casing & Tubing Size											
™ Hole Size			31 (*	Depth Set			» Sacks	Cement			
						_							
77 177 11			<u> </u>										
VI. Well			elivery Date	7									
5-44 11		- Gas De	sivery Date	ery Date M Test De		ate ³⁷ Test		ngih	M Thg. Pressur		30 Cag. Pressure		L.C.
" Choke Size			4 Oil 4		aler	4 Gu			# 10		4		 -
		***************************************			0.5			" AOF			" Test Metho	d	
" I bereby certil	y that the rule	es of the Oil (Conservation D	ivision have been	a complied				<u> </u>				
with and that the knowledge and b	promation .	given above i	true and com	piete to the best	of my		OI	L CON	SERVATI	ON D	IVISI	ON	
Signature:		Hea	rd	ORIGINAL SIGNED ON INC.									
Printed name							CISTRICT I SUPERVISOR						
GAYE HEARD													
Date	NAGER		Phone: -	Approval	Approval Date: MAY 2 3 1996								
·	05/22/9			05-393-2	727	L		ويجينك					
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	Previous O	perator Signa	ture			Printed	Name			Tu	le .	-	
												Da	104

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 all 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
- 2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- 3. Reason for filing code from the following table:

 NW New Wall

 RC Recomplotion

 CH Change of Operator

 AO Add oil/condensate transporter

 CO Change oil/condensate transporter

 AG Add gas transporter

 GG 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
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- 10. 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.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:
 F Federal
 S State
 P Fee
 J Jicarilia
 N Navajo
 U Ute Mountain Ute
 I Other Indian Tribe
- 13. The producing method code from the following table: F Flowing Pumping or other artificial lift
- 14. MO/DA/YR that this completion was first connected to a gas transporter
- 15. The permit number from the District approved C-129 for this completion
- 16. MO/DA/YR of the C-129 approval for this completion
- 17. MO/DA/YR of the expiration of C-129 approval for this completion
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- 20. 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.
- 21. Product code from the following table:
 O OII
 G Gae

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- 22. The ULSTR location of this POD II it is different from the well completion location and a short description of the POD (Example: "Bettery A", "Jones CPD", etc.)
- 23. 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.
- 24. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Exemple: "Battery A Water Tank", "Jones CPD Water Tank", etc.)
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- 29. Top and bottom perforation in this completion or casing shoe and TD if openhole
- 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,
- 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
- 38. MO/DA/YR that the following test was completed
- 37. Length In hours of the test
- 38. Flowing tubing pressure oil wells Shut-in tubing pressure gas wells
- 39. Flowing casing pressure oil wells Shut-in casing pressure gas wells
- 40. Diameter of the choke used in the test
- 41. Berrels 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:

 F Flowing
 P Pumping
 S Swabbing
 If other method please write it in.
- 48. 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
- 47. 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