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Dutnet ( PO Box 1980, ) District []	Ilobbs, NM	<b>\$\$2</b> 41-19 <del>60</del>	SIZIC OI NEW MEXICO Energy, Minerais & Natural Resources Department						best	Form Revised February 10, Instructions on Submit to Appropriate District Off S Copie				
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District IV				Santa	a Fe,	NM 87	7504	-2088			F		·	
PO Box 2088, 1 I.				TIOW	ד דמי א						L		ENDED REPOR	
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	PROPER 1 Repor		as Servia	Services, Inc.						004058				
P. O.	Box 755 NM 882									<sup>3</sup> Reason for Filing Code				
)	INPI 002		<sup>4</sup> Pool Name							CO 06/01/96				
30 - 0 25 -			Langlie Mattix SR-QU-GB										Pool Code 240	
' <b>n</b> 0025	roperty Code		* Property Name Federal "B"										ell Number	
		Location	<u> </u>	Fede	ral	"B"							1	
Ul or lot no.	<sup>10</sup> Surface Location r lot no. Section Towaship					ect from the		North/South Line		Foot from the	East/V	Vest line	County	
G			37E	~   {		1980		North		1980		ast	Lea	
UL or lot no.	<sup>11</sup> Bottom Hole Lo					· · · · · · · · · · · · · · · · · · ·		······································						
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" Lae Code		ag Method C		Connection I	 Date	1980 " C-129 1	Permi	Nor Number		1980 • C-129 Effective		ast "Cu	Lea 29 Expiration Date	
F			3/24/59										47 Expiration Date	
III. Oil an	nd Gas	Transpo	rters "Transporter											
OGRID	OGRID		and Address			" POD		<b>)</b>	<sup>31</sup> O/G			POD ULSTR Location and Description		
012852 KOCH OIL (				0702	0702310 0			G-14-25S-37E						
WICHITA. KS			KS 67201-											
lst City Ba			ank Tower				0702330 0		A-14-25S-37E					
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د 	Hole Size	» C	" Casing & Tubing Size				<sup>33</sup> Depth Set				<sup>25</sup> Sacks Cement			
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			livery Date <sup>24</sup> Test Da				X	Test Length		<sup>34</sup> Tbg. Pre	#4U F\$	• Cog. Pressure		
" Choke	" Choke Size		Oli 4 Wate					<sup>Ф</sup> Gы		4 AO	F	" Test Method		
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Printed asme!	Dup	Hear	ro				oved b	ру: С		àl signed b' Herrict i su				
GAYE HEARD								Title:						
MA:	Appn	Approval Date: MAY 2 3 1990												
" If this is a cha	05/22/9 age of open		Phone: 50	5-393-2	727									
					: 46			r						
	Previous Op	erator Signa	lure			M	ated	Name		·····	าน	e	Date	

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## New Mexice Oil 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 nearest whole bar mal

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.

Improperiy 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.
- 3.
- 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 RT Request for test allowable (Include volume requested) If for any other reason write that reason in this box,
- The API number of this well 4.
- Б. The name of the pool for this completion
- 6. The pool code for this pool
- 7. The property eode 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: F Federal S State P Fee J Jicarilia 12.

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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 18.
- MO/DA/YR of the expiration of C-129 approval for this completion 17.
- The gas or ell 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.
- educt code from the following table: Oil Gas 21.

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- The ULSTR location of this POD H 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 28.
- 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
- Depth of casing and tubing. If a casing liner show top and 32.
- 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
- MO/DA/YR that the following test was completed 36.
- 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
- Diameter of the choke used in the test 40.
- 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.

- F Flowing P Pumping S 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 this 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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