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Caergy, Miserals & Natural Resources Department

rorm L-104 Revised February 10, 1994 Instructions on back

District II NO Drawer DD, Artesia, NM \$8211-6719 District III

OIL CONSERVATION DIVISION
PO Box 2088

Submit to Appropriate District Office 1000 Rie Branes Rd., Aztec, NM 87410 5 Copies Santa Fe, NM 87504-2088 District IV ☐ AMENDED REPORT PO Box 2008, Santa Fe, NM 87504-2008 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT I. Operator name and Address 1 OGRID Number CHANCE PROPERTIES 004058 c/o Oil Reports & Gas Services, Inc. P. O. Box 755 Reason for Filing Code Hobbs, NM 88241 CO 9/27/95 API Number Pool Name ⁴ Pool Code **30 - 0** 25-11591 Langlie Mattix SR-QU-GB 37240 ¹ Property Code Property Name ' Well Number 002514 Federal "B" 10 Surface Location Ul or lot no. Section Township Range Lot.Ida Feet from the North/South Line | Feet from the East/West line 14 25S 37E 1980 North 1980 East 11 Bottom Hole Location Lea UL or lot no. Section Township Range Lot Ida Feet from the North/South line | Feet from the East/West Las 14 25S 37E 1980 North 1980 East 12 Lee Code Lea 13 Producing Method Code 14 Gas Connection Date " C-129 Permit Number 16 C-129 Effective Date 17 C-129 Expiration Date P 3/24/59 III. Oil and Gas Transporters 17 Transporter Name and Address Transporter OGRID " POD 31 O/G " POD ULSTR Location and Description 018053 Pride Pipeline Co. 0702310 0 G-14-25S-37E P. O. Box 2436 Abilene, TX 79604 Sid Richardson Gasoline Co. 020809 0702330 0 A-14-25S-37E 1st City Bank Tower 201 Main Street Fort Worth, TX 76102 Produced Water POD M POD ULSTR Location and Description Well Completion Data Spud Date M Ready Date » TD " PBTD " Perforations M Hole Size 31 Casing & Tubing Size 11 Depth Set 35 Sacks Cement VI. Well Test Data Date New Oll M Gas Delivery Date " Test Date " Test Length " The. Pressure " Cag. Pressure " Choke Size 4 OI 4 Water Gas " AOF 4 Test Method 4 I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. OIL CONSERVATION DIVISION ORIGINAL BELLE FURTHER REPATON Signature: Teren Approved by: DISTRICT I SUPERVISOR Printed name: Laren Holler Title: Title: Approval Date: Agent OCT 04 1995 Date: 09/29/95 Phone: 505-393-2727 " If this is a change of operator fill in the OGRID number and name of the previous operator Previous Operator Signature Printed Name Title Date

New Mexico 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 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, preperty 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.

- 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.

Resean for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator

AO Add oli/condensate transporter

CO Change oli/condensate transporter

AG Add gase transporter

CG Change gas transporter

RT Request for test allowable (include volume requested) requested) other reason write that reason in this box. If for any

- The API number of this well 4.
- The name of the pool for this completion 5.
- The pool code for this pool 6.
- The property code for this completion 7.
- 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: 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 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/DANR 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: "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", etc.) 24.
- MO/DA/YR drilling commenced 25.
- MO/DA/YR this completion was ready to produce 26.
- Total vertical depth of the well
- Plugback vertical depth 28.
- Top and bottom perforation in this completion or easing shoe and TD if openhole 29.
- Inside diameter of the well bore 30.
- 31. Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and 32.
- 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.

- MO/DA/YR that new oil was first produced 34
- MO/DA/YR that gas was first produced into a pipeline 35.
- MO/DA/YR that the following test was completed 36.
- Length in hours of the test 37.
- Flowing tubing pressure oil wells Shut-in tubing pressure gas well 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- Diameter of the choke used in the test 40.
- Barrels of oil produced during the test 41.
- Barrels of water produced during the test 42.
- MCF of gas produced during the test 43.
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well: 45.

Flowing Pumping 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.

