

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, NM 87505

☐ AMENDED REPORT

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator name and Address CHANCE PROPERTIES & EQUIPMENT c/o OIL REPORTS & GAS SERVICES, INC. P. O. BOX 755 HOBBS, NEW MEXICO 88241		2. OGRID Number 004067
3. Reason for Filing Code Co- EFFECTIVE 09/01/98		
4. API Number 30-025-26027	5. Pool Name SIOUX T-Y-SR	6. Pool Code 56610
7. Property Code 002525	8. Property Name SITTING BULL "A"	9. Well Number #001

II. 10. Surface Location

Ut or lot no. E	Section 32	Township 25S	Range 36E	Lot. Idn.	Feet from the 1980	North/South Line North	Feet from the 660	East/West Line West	County Lea
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11. Bottom Hole Location

Ut or lot no. E	Section 32	Township 25S	Range 36E	Lot. Idn.	Feet from the 1980	North/South Line North	Feet from the 660	East/West Line West	County Lea
12. Log Code S	13. Producing Method Code P	14. Gas Cessation Date 06/05/79		15. C-129 Permit Number		16. C-129 Effective Date		17. C-129 Expiration Date	

III. Oil and Gas Transporters

18 Transporter OGRID	19 Transporter Name and Address	20 POD	21 O/G	22 POD ULSTR Location and Description
171771	WEST TEXAS CRUDE OIL TRANSPORT, INC. P. O. BOX 1119 KERMIT, TX 79745	0703010	O	E-32-25S-36E
020809	SID RICHARDSON GASOLINE CO. 201 MAIN STREET FORT WORTH, TX 76102	0703030	G	E-32-25S-36E

IV. Produced Water

23 POD	24 POD ULSTR Location and Description
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V. Well Completion Data

25 Spud Date	26 Ready Date	27 TD	28 PBTD	29 Perforations	30 DHC, DCMC
31 Hole Size	32 Casing & Tubing Size	33 Depth Set	24 Sacks Cement		

VI. Well Test Data

35 Date New Oil	36 Gas Delivery Date	37 Test Date	38 Test Length	39 Tbg. Pressure	40 Csg. Pressure
41 Choke Size	42 Oil	43 Water	44 Gas	45 AOF	46 Test Method

I hereby certify that the rules of 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. Signature: <i>Gaye Heard</i>		OIL CONSERVATION DIVISION Approved by: <i>Chris Williams</i> DISTRICT I SUPERVISOR	
Printed Name: GAYE HEARD		Title:	
Title: AGENT		Approval Date: AUG 25 1998	
Date: 08/10/98	Phone: (505) 393-2727		
47 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 LABELED
"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, 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 Well
RC Recompletion
CH Change of Operator (Include the effective date.)
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.
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 Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe
13. The producing method code from the following table:
F Flowing
P 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 Oil
G Gas
22. 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.)
23. The POD number of the storage from which water is moved
from this property. If this is a new well or recompletion and
the 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
(Example: "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. Write in 'DHC' if this completion is downhole commingled
with another completion, 'DC' if this completion is one of
two non-commingled completions in this well bore, or 'MC'
if there are more than three non-commingled completions
in this well bore.

31. Inside diameter of the well bore
 32. Outside diameter of the casing and tubing
 33. Depth of casing and tubing. If a casing liner show top and
bottom.
 34. Number of sacks of cement used per casing string
- If 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.
35. MO/DA/YR that new oil was first produced
 36. MO/DA/YR that gas was first produced into a pipeline
 37. MO/DA/YR that the following test was completed
 38. Length in hours of the test
 39. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
 40. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells
 41. Diameter of the choke used in the test
 42. Barrels of oil produced during the test
 43. Barrels of water produced during the test
 44. MCF of gas produced during the test
 45. Gas well calculated absolute open flow in MCF/D
 46. The method used to test the well:
F Flowing
P Pumping
S Swabbing
If other method please write it in.
 47. 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
 48. 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

