District I PO Box 1980, Hobbs, NM \$8241-1980 District II

State of New Mexico

Form C-104 Revised February 10, 1994

Laren Holler

Previous Operator Signature

Agent

Title:

Date: 09/29/95

NO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rie Brazos Rd., Aztec, NM 87410				OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088					ON	Submit to Appropriate District Office 5 Copies				
District IV PO Box 2088, Se	unta Fe,	NM 875	04-2088			.,						AMI	ENDED REPORT	
I.		REC	UEST			LE AN	D AU	THOR	IZAT	ON TO TE	RANSE	ORT	•	
CHANCE	PROPE	CRTIE	S & EQ	Operator mai QUIPMENT	ne and Address			³ OGRID Number						
1	_		& Gas	Services, Inc.						004058				
P. O. B										3 Reason for Filing Code				
Hobbs, NM 88241				⁶ Pool Name						со	9/	9/27/95 ' Pool Code		
30 - 0 25 - 26027				Sioux-Tansill-Yates-SR								56610		
⁷ Property Code				1 Property Name							_	' Well Number		
002525			Sitting Bull "A"						1					
			cation											
Ul or lot no.	A or lot no. Section		waship	Range	Lot.Idn	Idn Feet from the		North/South Line		Feet from the	East/We	ast/West line County		
E 11 v			25S	37E		1980		North		660	We	West Lea		
UL or lot no. Section Townshi					D . A					· y	Cast/West line County			
E E	32		25S		Lot lan	Feet from the		North/South line		Feet from the			County	
12 Lee Code		lucing N	4cthod Co	36E	Connection Date			Nor t Number		660 C-129 Effective	We		Lea 129 Expiration Date	
s	s)	1	5/79				ŀ	G-127 MICCOLE		<u>. </u>	Swhiisnon Date	
III. Oil ai		s Tra	anspor	ters					L					
Transporter OGRID		19 Transporter Name and Address					" POI	OD " O/G			POD ULSTR Location			
0 18053		Pride Pipeline					0703010			7.00		and Description		
		P. O. Box 2436				2000	0703010 O E-3			E-32-	2-25S-36E			
61171				TX 79604							**			
020809		Sid Richardson Gasoline Co. 1st City Bank Tower 201 Main Street					0703030 G			E-32-25S-36E				
		Fort Worth, TX 79102												
				 			*************	************	************	<u> </u>	····			
A TOTAL	* 194					Street,								
IV. Prodi	iced \	Water	•											
	V. Produced Water " POD ULSTR Location and Description													
V. Well (letior	1 Data	-										
" Spud Date				26 Ready Date			" TD			" PBTD		2º Perforations		
	→ Hole S	liva	<u> </u>	31.0 1 2.011 21					ID. 4 C.					
Hole Size				11 Casing & Tubing Size				·····	Depth Se	³³ Sacks Cement			s Cement	
														
							 					 -		
							-							
VI Wall	Test	Data		<u> </u>	· · · · · · · · · · · · · · · · · · ·	 	<u> </u>				·			
VI. Well Test Data "Date New Oil "Gas De				livery Date × Test Date			27 Test Length			N Tog. Pr	PAGD PG	1	³⁹ Cag. Pressure	
				•						108.11			ost tiennie	
" Choke Size		41 Oi		Oil	il 42 Wi		 	4 Gas		" AOF		+	" Test Method	
"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. Signature:							OIL CONSERVATION DIVISION ORIGINAL SIGNED BY JERRY SEXTON Approved by: DISTRICT E SUPERVISOR							

Approval Date:

Printed Name

Phone: 505-393-2727

a If this is a change of operator fill in the OGRID number and name of the previous operator

Title

New Mexico Oil Concervation Division C-104 Instructions

F 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, 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.
- 3.

Resson 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.

- 4. The API number of this well
- Б. 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
- 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
- 12. Lease code from the following table:

Federal
State
Fee
Jicarlila
Navajo
Ute Mountain Ute
Other Indian Tribe

The producing method code from the following table:
F Flowing
P Pumping or other artificial lift 13.

- 14. MO/DA/YR that this completion was first connected to a gas transporter
- 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.
- MO/DA/YR drilling commenced 25.
 - 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
- Outside diameter of the casing and tubing 31.
- Depth of casing and tubing. If a casing liner show top and bottom. 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.

- 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
- **3**7. 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
- 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: F Flowing
 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.

