District I PO Box 1980, Hobbs, NM 88241-1980

District II 20 Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM 87410

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Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

istrict IV O Box 2088, Sa	ma Fe, NM	[8 7504-208 8			, _						ENDED REPORT		
<u> </u>						AND AU	THORI	ZATI	ON TO TR				
Operator name and Address										OGRID Number			
Doyle Hartman 500 N. Main									Reason for Filing Code				
Midland, Texas 79701									CH effective NG 11 1998				
*A		- · · · · · · · · · · · · · · · · · · ·	11. 31		' Pool Nam								
30 - 0 25-25746 Langlie Mattix							'Property Name				37240		
000	1 39 1/Q	387	Courtland Myers "B"							\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Vell Number		
I. 10 S	Surface	Location	~	7						·			
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		Hole Lo					South		1030	West	7		
UL or lot no.		Township	7	Lot Idn	Lot Idn Feet from		the North/South line		Feet from the	East/West line	County		
12 Lee Code	13 Produc	ing Method	Code 14 Gas	Connection D	ale	15 C-129 Pers	nit Number	11	C-129 Effective	Date 17 C	-129 Expiration Date		
II. Oil a	nd Gas	Transpo	orters						 	1			
"Transporter OGRID		" Transporter Name and Address				10 P	QO	²¹ O/G	22 POD ULSTR Location and Description				
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*****		4044 Penbrook Odessa. Tx 79762							Meter				
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Sı	pud Date		²⁴ Ready Date			" TD			" PBTD		1º Perforations		
™ Hole Size		ž e	31	" Casing & Tubing Size		e	¹¹ De		et	n 2	¹³ Sacks Cement		
													
													
VI. Well	l Test I	Data							ļ		····		
[™] Data New Oil		и Ga	a Delivery Date	34	[≥] Test Date		77 Test Length		3 Tbg. Pressure		" Csg. Pressure		
" Choke Size			4 Oil 4 Water			⁴³ Gas		4 AOF		" Test Method			
" I hereby ce	rtify that the	rules of the	Oil Conservation	Division have	been co	mplied							
knowledge an		TOTAL RIVER BOO	we is true and co	,	ocat of m				ONSERVA	_			
Printed name:							Approved by: ORIGINAL SIGNES BY JERRY SEXTON Title: DISTRICT FOURTRY/ISOR						
Don L. Mashburn Title: Engineer													
Date: 8-12-96 Phone: 915-684-4011							Approval Date: AUG & & 1880						
			in the OGRID a	umber and n			erator ·						
Amoc		DUCTION		٧٧		06RID	No. C			Title -	Date -		
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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 weils.

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.

- 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.

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.

If for any other reason write that reason in this box.

- 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
- 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.

S

State
Fee
Jicarilla
Navajo
Ute Mountain Ute
Other Indian Tribe

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

- MO/DA/YR that this completion was first connected to a 14.
- The permit number from the District approved C-129 for 15. this completion
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR 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: "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 24. (Example: Tank ,etc.)
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- Total vertical depth of the well 27.
- 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 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.
- MO/DA/YR that gas was first produced into a pipeline 35.
- 36. MO/DA/YR that the following test was completed
- 37. Langth in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 38.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 39.
- Diameter of the choke used in the test 40.
- 41. Barrels of oil produced during the test
- Barrels of water produced during the test 42.
- 43. MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D 44.
- The method used to test the well: 45.

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

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