

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

☐ **AMENDED REPORT**

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address ENERGEN RESOURCES CORPORATION 2198 Bloomfield Hwy Farmington NM 87401		² OGRID Number 162928
		³ Reason for Filing Code CH 10-1-98
⁴ API Number 30-0 30-039-22124	⁵ Pool Name BLANCO MESAVERDE	⁶ Pool Code 72319
⁷ Property Code 22027	⁸ Property Name RUDDOCK	⁹ Well Number 7

II. ¹⁰Surface Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
F	03	25N	03W		2170	N	1000	W	RA

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Lse Code E	¹³ Producing Method Code	¹⁴ Gas Connection Date			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

RECEIVED

SEP 22 1998

OIL CON. DIV.

DIST. 3

IV. Produced Water

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

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25 Spud Date	26 Ready Date	27 TD	28 PBTD	29 Perforations	30 DHC, DC, MC
31 Hole Sie	32 Casing & Tubing Size	33 Depth Set	34 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

47 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:

Printed name: _____

Original signed by Joe Niederhofer

Title:
General Manager

Date: 17-Sep-98

Phone: 505-325-6800

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

~~OCT 1 1998~~

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

~~Taurus Exploration U.S.A., Inc. #162928~~

1-Oct-98

Previous Operator Signature

Printed Name

Title

Date _____