District I PO Box 1988, Hobbs, NM 88241-1988 District II

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

Maralex Resources, Inc.

ru Drawer DD, Artesia, NM 88211-0719 District III				OIL CONSERVATION DIVISION PO Box 2088					Submit to Appropriate District Office			
1000 Rie Brazee Rd., Aziec, NM 87419 District IV				Santa Fe, NM 87504-2088					5 Copies			
PO Box 2008, S	anta Fe, NM	1 87504-2008	A								MENDED REPORT	
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Operator name and Address Robert L. Bayless Producer, LLC										OGRID Nu	mber	
P.O. Box 168										Reason for Filing Code		
	Farm	499					 Effective	CH	mg come			
* API Number 30 - 0 45-28523				Pool Name					' Pool Code			
30 - 0 45-28523				Basin Fruitland Coal						716	529	
-006328 23383				Property Name Oxnard WN Fed D8							Well Number	
		Location										
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	as abov											
12 Lee Code	13 Producis	ng Method Coo	de ¹⁴ Gas	Connection D	ate "C	:-129 Perm	ait Number		C-129 Effective 1	Date " C	C-129 Expiration Date	
	-d Goe '	T										
Transpor		Transport	CIS Transporter l	Name		34 PC	\n_	31 O/G				
OGRID			and Address				IOD 0/G		22 POD ULSTR Location and Description			
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IV. Produ	iced Wa	ter ·			Patrice	<u> </u>		745EP+73E				
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12362	50				C-15-T2	27N-R0	8W					
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M Date New Oil		M Gas Delivery Date		24 Test Date			³⁷ Test Length		M Tbg. Pressure		" Csg. Pressure	
** Choke Size		4 4 ,	Oil		4 Water		43 Gas		" AOF		4 may beat at	
		*.	0_		, , , , ,				^~	*	"Test Method	
" I hereby certif	y that the rul	les of the Oil C	onservation D	Division have be	en complied	 			-			
with and that the knowledge and b	information	given above is	true and com	picte to the best	t of my		OI	L CO	VSERVAȚI	ONDIVIS	SION	
Signature:	1-1	ans.	1_			Approve	OIL CONSERVATION DIVISION Approved by: SUPERVISOR DISTRICT #3					
Printed name:						Title:						
Title:		M BAYLE	SS							7 1000		
ENGINEER			Total (5		App. 0.	Approval Date: MAY 2 7 1998						
5/26		fill in the			05) 326–2659aber and name of the previous operatur							
11 1015 15 4	Se of	PALOF IM IN IN	OCKID BUI	mber and name	e of the previ			ana F	resident	05	/20/98	
	Previous O	perator Signat	lure				rd Name	are, i	Testuent	Title	/ 20/ 98 Date	

OGRID # 013998