

OIL CONSERVATION DIVISION

PO Box 2088
Santa Fe, NM 87504-2088

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address NORTHWEST PIPELINE CORP. P.O. BOX 58900 MS 2M3 SALT LAKE CITY, UTAH 84158-0900		² OGRID Number 016189
		³ Reason for Filing Code CG
⁴ API Number 3004527751	⁵ Pool Name BASIN FRUITLAND COAL	⁶ Pool Code 71629
Property Code 008466	⁸ Property Name COX CANYON UNIT	⁹ Well Number #202

II. ¹⁰ Surface Location

Ul or lot no. M	Section 16	Township 32	Range 11W	Lot.Idn	Feet from the 792'	North/South SOUTH	Feet from the 1157'	East/West WEST	County SAN JUAN
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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 5	¹³ Producing Method Code		¹⁴ Gas Connection Date 11-15-90		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 USTR Location and Description
025244	WILLIAMS FIELD SERVICES ATTN: GLENNA BITTON PO BOX 58900 MS 1A2 SALT LAKE CITY UTAH 84158-0900	2012430	G	M 16 32 11W

RECEIVED

APR 15 1994

OIL CON. DIV.

DIST. 3

IV. Produced Water

23 POD 2012450	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 Hole Size		31 Casing & Tubing Size		32 Depth Set		33 Sacks Cement			

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOP	⁴⁵ Test Method

46 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: KATHY BARNEY

Title: SR. OFFICE ASSISTANT

Date: April 7, 1994

Phone:

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date: APR 13 1994

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
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