P.O Drawer DD, Artesia, NM 88211-0719

Previous Operator Signature

Signature: Chow acy

District II

District III

State of New Mexico

Energy, Minerals, & Natural Resources Department

Form C-104 Revised February 21, 1994 Instructions on back

Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION PO Box 2088

1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87504-2088 ☐ AMMENDED REPORT PO Box 2088, Santa Fe, NM 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Operator Name and Address ²OGRID Number Burlington Resources Oil & Gas 14538 PO Box 4289 ³ Reason for Filing Code Farmington, NM 87499 CO - 7/11/96⁴ API Number ⁵ Pool Name 6 Pool Code 30-045-24150 BASIN DAKOTA (PRORATED GAS) 71599 Property Code * Property Name 9 Well Number 018625 STATE LINE #2 II. 10 Surface Location UI or lot no. Section Township Range Lot Idn Feet from the North/South Line East/West Line Feet from the County 013W 032N Ν G 1560 SAN JUAN 1680 Ε Bottom Hole Location UI or lot no. Section Township Range Lot Idn Feet from the North/South Line East/West Line Feet from the County 12 I se Code 13 Producing Method Code 14 Gas Connection Date 35 C-129 Permit Number 16 C-129 Effective Date ¹⁷ C-129 Expiration Date III. Oil and Gas Transporters 18 Transporter OGRID 22 POD ULSTR Location 19 Transporter Name 20 POD 21 O/G and Address
EL PASO FIELD SERVICES
P.O. BOX 1492 and Description 7057 G G-14-T032N-R013W EL PASO, TX 79978 iant Industries 9018 2434110 G-14-T032N-R013W 0 5764 US Hwy 64 Farmington, NM 87401 IV. Produced Water 23 POD 24 POD ULSTR Location and Description 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 AOF 45 Test Method 46 I hereby certify that the rules of the Oil Conservation Division have been complied **OIL CONSERVATION DIVISION** with and that the information given above is true and complete to the best of my Signature: Chan align Frank T. Chavez Approved by: Printed Name: District Supervisor Dolores Diaz Title: July 11, 1996 Approved Date: Production Associate Date: Phone 7/11/96 47 If this is a change of operator fill in the OGRID number and name of the previous operator

Printed Name

Dolores Diaz

Title

Production Associate

Date

7/11/96