## <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u>

E-mail Address:

Phone:

Date:

| District I 1625 N. French I District II 811 S. First St., A District III 1000 Rio Brazos District IV 1220 S. St. Franc | I 88210<br>, NM 87410 |                                 | Ol                                | State of New<br>Minerals & Mandal<br>Conservation<br>20 South St.<br>Santa Fe, NI | Francis Dr                                | 1                         | ces OCD - H<br>04/17/2<br>1866/Fit | OBBS<br>020<br>VED<br>one copy  | to appro           | Form C-104 Revised August 1, 2011 appropriate District Office  AMENDED REPORT |                             |  |
|--|-----------------------|---------------------------------|-----------------------------------|---|---|---------------------------|------------------------------------|---------------------------------|--------------------|---|-----------------------------|--|
| <sup>1</sup> Operator n  | I.                    | REQUI                           |                                   | OR ALI  |   |                           | ГНО                                | RIZATION <sup>2</sup> OGRID Num |                    | ANSP  | ORT                         |  |
|  |                       |                                 |                                   |   |   |                           |                                    | <sup>3</sup> Reason for F       | iling Code         | / Effecti   | ve Date                     |  |
| <sup>4</sup> API Number  |                       | <sup>5</sup> Pool Name          |                                   |   |   |                           |                                    |                                 | <sup>6</sup> Pool  | Code  | KZ                          |  |
| <sup>7</sup> Property C  | ode                   | <sup>8</sup> Proj               | perty Nan                         | ne  |   |                           |                                    |                                 | <sup>9</sup> Well  | <sup>9</sup> Well Number  |                             |  |
| II. <sup>10</sup> Sur  | face Lo               | cation                          |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
| Ul or lot no.  | Section               | Township                        | Range                             | Lot Idn   | n Feet from the North/South Line Feet fro |                           | Feet from the                      | East/West line Count            |                    | County  |                             |  |
| <sup>11</sup> Bo   | ttom Ho               | le Locatio                      | n                                 |   |   |                           |                                    |                                 |                    |   |                             |  |
| UL or lot no.  | Section               | Township                        | Range                             | Lot Idn   | Feet from the                             | North/South               | n/South line   Feet from the   Ea  |                                 | East/Wes           | Cast/West line County   |                             |  |
| 12 Lse Code 13 Producing Method Code   |                       |                                 | d 14 Gas Connection Date 15 C-129 |   |   | nit Number                | C-129 Effective                    | Date                            | <sup>17</sup> C-12 | 9 Expiration Date   |                             |  |
| III. Oil a   | nd Gas '              | Transport                       | ers                               |   |   |                           | <u> </u>                           |                                 | ļ                  |   |                             |  |
| 18 Transpor<br>OGRID   | ter                   | 19 Transporter Name and Address |                                   |   |   |                           |                                    |                                 |                    |   | <sup>20</sup> O/G/W         |  |
| OGRID  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    | $\top$  |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       | etion Data                      | _                                 | 1   | 23  | 24                        |                                    | 25_ 0                           | . +                | <del></del> ,   | 26 0: 0:                    |  |
| <sup>21</sup> Spud Da  | ite                   | <sup>22</sup> Ready             | Date                              |   | <sup>23</sup> TD                          | <sup>24</sup> PBTD        |                                    | <sup>25</sup> Perforat          | tions              | -   | <sup>26</sup> DHC, MC       |  |
| <sup>27</sup> Hole Siz   |                       | <sup>28</sup> Casing            |                                   | g & Tubir   | ng Size                                   | <sup>29</sup> Depth Set   |                                    | et                              | I                  | 30 Sacks  | s Cement                    |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
|  |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
| V. Well Test 1  31 Date New Oil  |                       | Data  32 Gas Delivery Date      |                                   | 33 Test Date  |   | <sup>34</sup> Test Length |                                    | h <sup>35</sup> Tbg. Pressure   |                    | e   | <sup>36</sup> Csg. Pressure |  |
| <sup>37</sup> Choke Size   |                       | <sup>38</sup> Oil               |                                   | <sup>39</sup> Water   |   | <sup>40</sup> Gas         |                                    |                                 |                    |   | <sup>41</sup> Test Method   |  |
| 63   |                       |                                 |                                   |   |   |                           |                                    |                                 |                    |   |                             |  |
| <sup>42</sup> I hereby cert<br>been complied   | with and              | that the infor                  | mation gi                         | ven above   |   |                           |                                    | OIL CONSERV                     | VATION D           | IVISION   | I                           |  |
| complete to the Signature:   |                       | •                               |                                   | ef.   |   | Approved by:              |                                    |                                 |                    | , •   |                             |  |
| ratima Vasguez   |                       |                                 |                                   |   |   | Patricia Martinez         |                                    |                                 |                    |   |                             |  |
| Printed name:  |                       |                                 |                                   |   |   | LM II                     |                                    |                                 |                    |   |                             |  |
| Title:   |                       |                                 | 1                                 | Approval Date: 6/15/20  |   |                           |                                    |                                 |                    |   |                             |  |