

District I
 PO Box 1980, Hobbs, NM 88241-1980
 District II
 811 South First, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

Form C-104
 Revised October 18, 1994
 Instructions on back
 Submit to Appropriate District Office
 5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address ELLIOTT OIL COMPANY P. O. BOX 1355 ROSWELL, NM 88201		¹ OGRID Number 007178
⁴ API Number 30 - 025 - 06335		⁴ Pool Name BLINEBRY
⁷ Property Code 3943		⁴ Pool Code 06660
⁷ Property Name ELLIOTT		⁴ Well Number 6

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
V	1	21S	37E		660'	NS	1980'	E W	LEA

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
V	1	21S	37E		660'	NS	1980'	E W	LEA

¹² Use Code F	¹³ Producing Method Code P	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
024650	DYNEGY MIDSTREAM SERVICES LIMITED PARTNERSHIP 1000 LOUISIANA SUITE 5800 HOUSTON, TX 77002	0930930	G	Sec. 1-21S-37E Lea County, NM

IV. Produced Water

²³ POD 0930950	²⁴ POD ULSTR Location and Description Sec. 1-21S-37E Lea County, NM
------------------------------	---

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTB	²⁹ Perforations	³⁰ DIIC, DC, MC

³¹ Hole Size	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

" 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: *Stephen L. Elliott*

Printed name: Stephen L. Elliott

Title: Managing Agent

Date: August 5, 1998

Phone: (505)622-5840

OIL CONSERVATION DIVISION

Approved by:

Original Filed by Gary Link Field Rep. II

Title:

Approval Date: SEP 15 1998

" 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
------------------------------	--------------	-------	------

New Mexico Oil Conservation Division
 C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be

accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for

38. Length in hours of the test

39. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells

40. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells

41. Diameter of the choke used in the test

42. Barrels of oil produced during the test

43. Barrels of water produced during the test

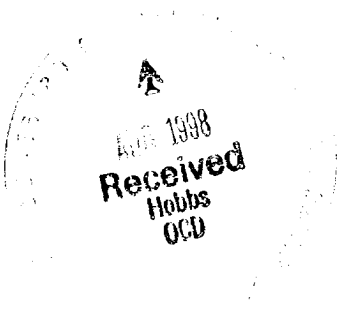
44. MCF of gas produced during the test

45. Gas well calculated absolute open flow in MCF/D

46. The method used to test the well:
F Flowing
P Pumping
S Swabbing
If other method please write it in.

47. The signature, printed name, and title of the person authorized to make the report, the date the report was signed, and the telephone number to call for questions about the report

48. The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date the report was signed by that person



changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

1. Operator's name and address

2. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.

3. Reason for filling code from the following table:
NW New Well
RC Recommendation
AD Change of Operator (include the effective date.)
CH Change of/condensate transporter
AO Add oil/condensate transporter
CO Change oil/condensate transporter
AG Add gas transporter
CG Change gas transporter
RT Request for test allowable (include volume requested)

4. The API number of this well

5. The name of the pool for this completion

6. The pool code for this pool

7. The property code for this completion

8. The property name (well name) for this completion

9. The well number for this completion

10. The surface location of the completion NOTE: If the United States government survey designates a Lot Number for the location use that number in the "UL or lot no." box. Otherwise use the OCD unit letter.

11. The bottom hole location of this completion

12. Lease code from the following table:
F Federal
S State
P Fee
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe

13. The producing method code from the following table:
P Pumping or other artificial lift
F Flowing

14. M/D/A/Y/R that this completion was first connected to a gas transporter

15. The permit number from the District approved C-129 for this completion

16. M/D/A/Y/R of the C-129 approval for this completion

17. M/D/A/Y/R of the expiration of C-129 approval for this completion

18. The gas or oil transporter's OGRID number

19. Name and address of the transporter of the product

20. The number assigned to the POD from which this product will be transported by the transporter. If this is a new well or recompletion and the POD has no number the district office will assign a number and write it here.

21. Product code from the following table:
G Gas
O Oil

22. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.)

23. The POD number of the storage from which water is moved from the property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.

24. The ULSTR location of the POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.)

25. M/D/A/Y/R drilling commenced

26. M/D/A/Y/R this completion was ready to produce

27. Total vertical depth of the well

28. Plugback vertical depth

29. Top and bottom perforation in this completion or casing shoe and TD if applicable

30. Write in "DHC" if this completion is downhole commingled with another completion, "DC" if this completion is one of two non-commingled completions in this well bore, or "MC" if there are more than three non-commingled completions in this well bore.

31. Inside diameter of the well bore

32. Outside diameter of the casing and tubing

33. Depth of casing and tubing. If a casing liner show top and bottom.

34. Number of sacks of cement used per casing string

If the following data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

35. M/D/A/Y/R that new oil was first produced

36. M/D/A/Y/R that gas was first produced into a pipeline

37. M/D/A/Y/R that the following test was completed