

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

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

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address EnerQuest Resources, LLC P.O. Box 11150 Midland, TX 79702		¹ OGRID Number 160620
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.		³ Reason for Filing Code NW
⁴ API Number 30 - 025 33780	⁵ Pool Name North Skaggs Abo	⁶ Pool Code 56640
⁷ Property Code 20153	⁸ Property Name McNeill "30"	⁹ Well Number 1

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
P	30	19S	38E		467	South	990	East	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
¹² Lse Code P	¹³ Producing Method Code P	¹⁴ Gas Connection Date NA		¹⁵ C-129 Permit Number Shut-in	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
013063	Lantern Petroleum Corp. Box 2281 Midland, TX 79702	2819394	0	Same as Surf location
	CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>11-19-97</u> UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.			

IV. Produced Water

²³ POD 2819776	²⁴ POD ULSTR Location and Description
------------------------------	--

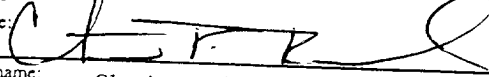
V. Well Completion Data

²⁵ Spud Date 2/05/97	²⁶ Ready Date 5/09/97	²⁷ TD 11,200'	²⁸ PBD 7824'	²⁹ Perforations 7374-7752	³⁰ DHC, DC, MC NA
³¹ Hole Size 17 1/2"	³² Casing & Tubing Size 13 3/8 48#		³³ Depth Set 421	³⁴ Sucks Cement 465	
11"	8 5/8 32#		4150	1325	
7 7/8"	5 1/2 15.5 & 17#		8920	745	

VI. Well Test Data

³⁵ Date New Oil 5/12/97	³⁶ Gas Delivery Date NA	³⁷ Test Date 7/09/97	³⁸ Test Length 24 hrs.	³⁹ Tbg. Pressure NA	⁴⁰ Csg. Pressure 20
⁴¹ Choke Size NA	⁴² Oil 2	⁴³ Water 10	⁴⁴ Gas 100	⁴⁵ AOF NA	⁴⁶ Test Method P

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: Christopher P. Renaud
 Title: Engineer
 Date: 8/19/97
 Phone: 915 685-3116

OIL CONSERVATION DIVISION
 Approved by: ORIGINAL SIGNED BY CHRIS WILLIAMS
 DISTRICT I SUPERVISOR
 Title:
 Approval Date:

* 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
-----------------------------	--------------	-------	------

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 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 filing code from the following table:

NW	New Well
RC	Recompletion
CH	Change of Operator (Include the effective date.)
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)

If for any other reason write that reason in this box.
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 this completion NOTE: If the United States government survey designates a Lot Number for this 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:

F	Flowing
P	Pumping or other artificial lift
14. MO/DA/YR that this completion was first connected to a gas transporter
15. The permit number from the District approved C-129 for this completion
16. MO/DA/YR of the C-129 approval for this completion
17. MO/DA/YR 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 this transporter. 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.
21. Product code from the following table:

O	Oil
G	Gas
22. The ULSTR location of this POD if it is different from the well completion location and a short description of (Example: "Battery A", "Jones CPD", etc.)
23. The POD number of the storage from which water is moved from this 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 this 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. MO/DA/YR drilling commenced
26. MO/DA/YR 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 openhole
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 test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.
35. MO/DA/YR that new oil was first produced
 36. MO/DA/YR that gas was first produced into a pipeline
 37. MO/DA/YR that the following test was completed
 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 this report, the date this report was signed, and the telephone number to call for questions about this 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 this report was signed by that person