

District I
 PO Box 1980, Hobbs, NM 88241-1980
 District II
 PO drawer DD, Artesia, NM 88211-0719
 District III
 1000 Rio Bravo Rd, Aztec, NM 87410
 Aztec, NM, 87410
 District IV
 PO box 2088, Santa Fe, NM 87504-2088

State of New Mexico
 Energy, Minerals & Natural Resources Department

Form C-104
 Revised February 10, 1994
 Instructions on back

OIL CONSERVATION DIVISION
 P.O. BOX 2088
 SANTA FE, NM 87504-2088

Submit to Appropriate District Office
 5 Copies

AMENDED REPORT

I. **REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

OPERATOR NAME AND ADDRESS RAY WESTALL P.O. BOX 4 LOCO HILLS, NM 88255		OGRID NUMBER 018862
API NUMBER 30-015-33312		REASON FOR FILING CODE NW
POOL NAME CRAZY HORSE DELAWARE	POOL CODE 13390	
PROPERTY CODE 16695	PROPERTY NAME PALADIN FEDERAL	WELL NUMBER 006

II. **SURFACE LOCATION**

UL OR LOT NO.	SECTION	TOWNSHIP	RANGE	LOT.IDN	FEET FROM THE	NORTH/SOUTH LINE	FEET FROM THE	EAST/WEST LINE	COUNTY
F	19	19S	33E		1650'	NORTH	1980'	WEST	LEA

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
F									

LSE CODE F	PRODUCING METHOD CODE ARTIFICIAL LIFT	GAS CONNECTION DATE 9/26/96	C-129 PERMIT NUMBER	C-129 EFFECTIVE DATE	C-129 EXPIRATION DATE
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III. **OIL AND GAS TRANSPORTERS**

TRANSPORTER OGRID	TRANSPORTER NAME AND ADDRESS	POD	O/G	POD ULSTR LOCATION AND DESCRIPTION
005108	SENTINEL 1406 NW COUNTY RD HOBBS, NM 88240	451510	O F E	19 19S 33E
005097	CONOCO, INC. P.O. BOX 2157 HOUSTON, TX 77252	451530	G F E	19 119S 32E 33

IV. **PRODUCED WATER**

POD 451550 2815922	POD ULSTR LOCATION AND DESCRIPTION FE 19 19S 33E
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V. **WELL COMPLETION DATA**

SPUD DATE	READY DATE	TD	PBTD	PERFORATIONS
8/20/96	9/26/96	7850'	7694'	7390'-7430'

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	515'	525
12 3/4	8 5/8	2914'	1350
7 1/2	5 1/2	7862'	1310

V. **WELL TEST DATA**

DATE NEW OIL	GAS DELIVERY DATE	TEST DATE	TEST LENGTH	TBG PRESSURE	CSG PRESSURE
9/16/96	10/26/96	10/02/96	24 HRS	20#	20#

CHOKE SIZE	OIL	WATER	GAS	AOF	TEST METHOD
1"	63	40	150		PUMP

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: *Susan Parker*

Printed name: **SUSAN PARKER**

Title: **PRODUCTION CLERK**

Date: **11/13/96**

Phone: **(505) 677-2370**

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

NOV 18 1996

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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