



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
 OIL CONSERVATION DIVISION

TONY ANAYA  
 GOVERNOR

June 29, 1984

POST OFFICE BOX 2088  
 STATE LAND OFFICE BUILDING  
 SANTA FE, NEW MEXICO 87501  
 (505) 827-5800

Mr. Jim Anderson  
 Corrida Oil Inc.  
 P. O. Box 5550 T.A.  
 Denver, Colorado 80217

Re: CASE NO. 8163  
 ORDER NO. R-7574

Applicant:  
Corrida Oil Inc.

Dear Sir:

Enclosed herewith are two copies of the above-referenced Division order recently entered in the subject case.

Yours very truly,

*Joe D. Ramey*  
 JOE D. RAMEY  
 Director

JDR/fd

Copy of order also sent to:

Hobbs OCD	<u>        </u>	<u>        </u>	X
Artesia OCD	<u>        </u>	<u>        </u>	X
Aztec OCD	<u>        </u>	<u>        </u>	X

Other \_\_\_\_\_

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EXHIBIT LIST

EXAMINER: *Michael E. Stogner*

CASE NUMBER: *8163*

HEARING DATE: *May 23, 1984, June 20, 1984*

APPLICANT			OPPOSITION		
No.	Description	Admitted	No.	Description	Admitted

80acre Non-Standard Provation  
Unit comprising the E $\frac{1}{2}$  NE $\frac{1}{4}$  of  
Sect. 24, T-25N, R-13W, Bist.  
Lower Gallup Oil Pool, San Juan Co.

CASE #: 8163

DATE FILED April 25, 1984  
Called In

APPLICANT

Name: Corrida Oil Inc.

1. Representative: Jim Anderson
2. Position: \_\_\_\_\_
3. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Telephone: \_\_\_\_\_
5. ATTORNEY: \_\_\_\_\_
6. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Telephone: \_\_\_\_\_

OPPOSITION

Name: \_\_\_\_\_

1. Representative: \_\_\_\_\_
2. Position: \_\_\_\_\_
3. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Telephone: \_\_\_\_\_
5. ATTORNEY: \_\_\_\_\_
6. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Telephone: \_\_\_\_\_

INTERVENOR (if any) :

or

INTERESTED PARTY (IES):

WITNES LIST

Case No. 8163 Date of Hearing May 23, 1984 June 20, 1984

**APPLICANT:** Corrida Oil Inc. **OPPOSITION:**

<u>No.</u>	<u>Qualified</u>	<u>Sworn</u>
1) Name : _____	<input type="checkbox"/>	<input type="checkbox"/>
Position : _____		
_____		
_____		
_____		

1) Name : _____	<input type="checkbox"/>	<input type="checkbox"/>
Position : _____		
_____		
_____		
_____		

2) Name : _____	<input type="checkbox"/>	<input type="checkbox"/>
Position : _____		
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2) Name : _____	<input type="checkbox"/>	<input type="checkbox"/>
Position : _____		
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3) Name : _____	<input type="checkbox"/>	<input type="checkbox"/>
Position : _____		
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3) Name : _____	<input type="checkbox"/>	<input type="checkbox"/>
Position : _____		
_____		
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