

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

C.O. FULTON P.O. BOX 1121 ARTESIA, N.M. 88211-1121		1 Operator name and Address	2 OGRID Number 003420
			3 Reason for Filing Code CH EFFECTIVE 12/4/96
4 API Number 30 - 0 15-02869	5 Pool Name SQUARE LAKE; GRAYBURG-SAN ANDRES		6 Pool Code 57570
7 Property Code 20168	8 Property Name DUBLIN		9 Well Number 2-B

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot 1da	Feet from the	North/South Line	Feet from the	East/West line	County
G	3	17S	29E		1980	N	1980	E	

¹¹ Bottom Hole Location

U. or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹¹ Use Code S	¹³ Producing Method Code F		¹⁴ Gas Connection Date		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

III. Oil and Gas Transporters

" Transporter OGRID	" Transporter Name and Address	" POB	" O/G	" POB ULSTR Location and Description
15694	NAVAJO REFINING CO. P.O. DRAWER 159 ARTESIA, N.M. 88210	1137810	()	

DEC 04 '96

O. C. D.
ARTESIA OFFICE

IV. Produced Water

11 POD	14 POD ULSTR Location and Description
V. Wall G. 1st D.	

V. Well Completion Data

" Spud Date	" Ready Date	" TD	" PBTD	" Perforations	" DIIC, DC, MC
" Hole Size	" Casing & Tubing Size	" Depth Set	" Sacks Cement		
			Part TD-3		
			1-24-97		
			sky up		

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

⁶ 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: LOUIS FULTON

Title: OWNER

Date: 12/4/96	Phone: 746-4787
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OIL CONSERVATION DIVISION

Approved by: **SUPERVISOR, DISTRICT II**

Title:

Approval Date: **DEC 31 1996**

4 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 _____