## strict I

'O Box 1980, Hobbs, NM 88241-1980

PO Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION** PO Box 2088

State of New Mexico

Energy, Minerals & Natural Resources Department

Santa Fe, NM 87504-2088

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

Submit to Appropriate District Office

5 Copies

District IV												AMENDED REPORT		
PO Box 2088, S	,			. • • • • • • • • • • • • • • • • • • •	T EN A BOTTO A 1	TTTTOD	ere Ameri		~^	A BIO	NO DO			
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		perating C	orporatio				OGRID Number 136025							
		Suite 1500				Reason for File				-				
	na City, ( Number	Oklahoma	73102			Convert to WIW				VIW		re 10/11/96 Pool Code		
30-015-2				GRAYBURG JACKSON				R-Q-G-SA				28509		
Prope	erty Code			Property Na				ne				Well Number		
	15968			_ <del></del>	Keel "B"	:l "B"					42			
		ocation	<u></u>	<u> </u>				<del></del>				<del></del>		
UI or lot no. K			Range 31E	Lot.Idn	Feet from the 1980	North/South			Feet from the 1780		West Line W	County EDDY CO., NM		
	<del></del>	Iole Loca			1700	1 5		<u> </u>				EDD I CO., INIVI		
UI or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South	h Line	Feet f	from the	East/	West Line	County		
12 Lse Code	" Produc	cing Method C	ode	ode Gas Connection Date			C-129 Permit Number "C-1			ffective	e Date	<sup>17</sup> C-129 Expiration Date		
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	sporter	s Transp	orters	18 Transporte	Maa	27	POD		n O/G	T	n Pop I			
OGR.				and Addr			POD		U/G			JLSTR Location Description		
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									OIL CON. DIV.					
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IV. Prod		<u>Vater</u>	· · · · · ·											
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V. Well (	Comple	otion Da	<u></u>				<del></del>							
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-P	Date		Ready Date			ID						Perforations		
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<sup>3</sup> Date !	New Oil	* G	Gas Delivery Date		* Test Date	Test Date 17		Test Length		<sup>31</sup> Tbg. Pressure		30 Csg. Pressure		
40 Choke Size			<sup>41</sup> Oil <sup>42</sup> Water				43 Gas		4 AOF		:07	46		
Chore Size		Oil Water				Gas			AOr		<sup>45</sup> Test Method			
"I hereby certify	that the rul	les of the Oil (	Conservation	n division have	e been complied	T								
with and that the		on given above	e is true and	complete to the	ne best of my		O	IL CO	ONȘERV	'ATI	ON DIVIS	SION		
knowledge and b	elief.	(	R.,,	2 n x		1								
Signature: Printed Name:		Approved by:												
Title:	⊣——	Title: Approval Date:												
Date:	10/22/	neering Tea /96	Phone:	(405)	552-4527	Approva	aic.							
If this is a cl	hange of or	perator fill in t	he OGRID	number and na	ame of the previous	s operator								
		Operator Signa												
	P	rinted Name					Title	Date						