## State of New Mexico

Energy, Minerals & Natural Resources Department

Form C-104

Revised October 18, 1994

Instructions on back

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

Submit to Appropriate District Office

5 Copies

X AMENDED REPORT

| .•                              |                                   | Fe, NM 87505<br>EST FOR |                              | )WABLF                 | E AND AU                | THORE                    | LATION                                | N TO TRA              | ANSP(                                | ORT              |                                       |  |
|---------------------------------|-----------------------------------|-------------------------|------------------------------|------------------------|-------------------------|--------------------------|---------------------------------------|-----------------------|--------------------------------------|------------------|---------------------------------------|--|
| •                               | 1000                              | Operator N              |                              |                        |                         |                          |                                       |                       |                                      | D Number         |                                       |  |
|                                 |                                   | Energy Prod             | duction (                    | Company, L             | <b>P</b> .              |                          |                                       |                       | 6137                                 |                  |                                       |  |
|                                 |                                   | Broadway, St            |                              |                        |                         |                          | <sup>3</sup> Reason for Filing Code   |                       |                                      |                  |                                       |  |
| 4 ADI                           |                                   | ma City, Ok             | ₹73192•<br>Г                 | . 73102-8260 Pool Name |                         |                          |                                       | CH 1/1/2000 Fool Code |                                      |                  |                                       |  |
|                                 | Number -015-26789                 | !                       | Grayburg Jackson SR-QN-GB-SA |                        |                         |                          | šA                                    | 28509                 |                                      |                  |                                       |  |
|                                 | perty Code                        |                         | Property Name                |                        |                         |                          |                                       |                       |                                      |                  | Well Number                           |  |
|                                 | 20086                             |                         | J L Keel B                   |                        |                         |                          |                                       |                       |                                      |                  | 47                                    |  |
|                                 | ırface Loc                        | cation                  | <del></del>                  |                        | <del>, _</del> .        | <del></del>              |                                       |                       |                                      |                  | <del></del>                           |  |
| Л or lot no.                    | 1 1                               | ownship                 | Range                        | Lot.Idn                | Feet from the           | North/Sout               |                                       | Feet from the<br>1880 | 1                                    | Vest Line<br>FWL | County<br>Eddy                        |  |
| K Po                            | 05 L                              | 17S                     | 31E                          |                        | 1980                    | FSL                      | <u>'</u>                              | 1880                  |                                      | 2 W L            | Eddy                                  |  |
| UI or lot no.                   | Section To                        | ownship                 | Range                        | Lot.Idn                | Feet from the           | North/Sout               | th Line                               | Feet from the         | East/V                               | Vest Line        | County                                |  |
|                                 | <u> </u>                          | 3Witsinp                | Kange                        | LOLIUX                 | rect nom an             | 110147                   | 11 242                                |                       |                                      |                  |                                       |  |
| '2 Lse Code                     | Lse Code 13 Producing Method Code |                         | Gas Connection Date 15 C     |                        | <sup>15</sup> С-129 Реп | -129 Permit Number C-129 |                                       | ) Effective           | Effective Date C-129 Expiration Date |                  |                                       |  |
|                                 | and Gas                           | Transpor                | ters                         |                        |                         |                          |                                       | 12                    |                                      | 17               |                                       |  |
|                                 | insporter                         |                         | "Transporter Name            |                        |                         |                          | <sup>™</sup> POD                      | " O/G                 |                                      |                  | ULSTR Location Description            |  |
| OG                              | RID                               | <del></del>             | and Address                  |                        |                         |                          |                                       |                       | +                                    | 4110 1           | Эезсприоп                             |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      | 23               | *                                     |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  | 5. 1<br>. 15. 1<br>. 2 1              |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |  |
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|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 |                                   |                         |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
| IV Pro                          | duced W                           | ater                    |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
| 14                              | POD 23 POD                        | att.                    | T                            |                        |                         | * POD ULS                | TR Location                           | n and Description     | on.                                  |                  |                                       |  |
|                                 |                                   |                         |                              | <del></del>            |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 | l Complet                         |                         |                              |                        |                         |                          |                                       | ***                   |                                      |                  |                                       |  |
| 25 Spud Date                    | ie                                | <sup>26</sup> Ready Da  | ate 27 TD                    |                        |                         | 28 PB?                   | <sup>28</sup> PBTD <sup>29</sup> Peri |                       | orations                             |                  | <sup>30</sup> DHC, DC, MC             |  |
|                                 | 31 Hole Size                      |                         | <del></del>                  | 32 Casing &            | Tubing Size             |                          | 33 Depth Set                          |                       |                                      |                  | Sacks Cement                          |  |
|                                 | Hole Size                         |                         |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 |                                   |                         | <u> </u>                     |                        |                         |                          |                                       | <del></del>           |                                      | <u> </u>         |                                       |  |
| <del> </del>                    |                                   |                         | <del> </del>                 |                        |                         |                          |                                       |                       |                                      | <del> </del>     |                                       |  |
| *77 <b>\1</b> / <sub>4</sub>    | II Tost De                        | -4                      |                              |                        |                         |                          |                                       |                       |                                      |                  |                                       |  |
|                                 | ell Test Da                       |                         | Delivery D                   | )ate                   | 37 Test Dat             | te                       | 34 Test Leng                          | eth T                 | 39 Tbg.                              | Pressure         | 40 Csg. Pressure                      |  |
| يار                             | TE MEM OIL                        |                         | <u> </u>                     |                        |                         | <u> </u>                 |                                       |                       |                                      |                  |                                       |  |
| 41 Ch                           | 11 Choke Size                     |                         | <sup>42</sup> Oil            |                        | 43 Water                | 43 Water                 |                                       | s                     | 43 AOF                               |                  | 48 Test Method                        |  |
|                                 |                                   |                         |                              | <del></del>            |                         |                          |                                       |                       |                                      |                  |                                       |  |
| 1                               | tify that the rule                |                         |                              |                        |                         |                          | O.                                    | IL CONSE              | RVAT                                 | ION DIV          | JISION                                |  |
| with and that t<br>knowledge an | the information                   | given above             |                              | Omplete to up          | Test of my              |                          | <b>-</b>                              | 10 00                 | 1011                                 | 10               | 10.0                                  |  |
| Knowledge au<br>Signature:      | ia pener.                         | M.                      | ( "                          | //                     |                         | Approve                  | d by: <u>주문</u>                       | anal si               | 311213                               | AV TIM           | W CIM                                 |  |
| Printed Name                    | e:                                | Steve McNa              | illy                         | $U_{\perp}$            |                         | Title:                   | Title: MATRICY II SHAPTAVISOR         |                       |                                      |                  |                                       |  |
|                                 |                                   | District Mai            | nager                        | 8                      |                         |                          | Approval Date:                        |                       |                                      |                  |                                       |  |
| Title:                          |                                   |                         |                              |                        |                         |                          |                                       | ****                  |                                      |                  |                                       |  |
| Date: 3/                        | /20/00                            |                         | Phone:                       |                        | 35-3611)                |                          | M.                                    | AR 3 U 2              | 2000                                 |                  |                                       |  |
| Date: 3/                        | a change of ope                   |                         | OGRID n                      | number and nar         | me of the previous      | s operator               | m.                                    | AK 3 U                | 2300                                 |                  |                                       |  |
| Date: 3/                        |                                   |                         | OGRID n                      | number and nar         |                         | as operator  Printed Nam |                                       | <u> </u>              |                                      | Title            | Date                                  |  |