

☐ AMENDED REPORT

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

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address PENNZOIL EXPLORATION & PROD. CO. P. O. BOX 50090 MIDLAND TX 79710-0090		OGRID Number 017172 17195
		Reason for Filing Code CH 01/01/95
AFI Number 30 - 015-00291	Pool Name Atoka San Andres	Pool Code 03610
Property Code 008812	Property Name Atoka San Andres Unit	Well Number 140

II. ¹⁰ Surface Location

UI or lot no.	Section	Township	Range	Lot/Ida	Feet from the	North/South Line	Feet from the	East/West line	County
G	13	18S	26E		1650	North	2310	East	Eddy

" Bottom Hole Location

11 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
" Les Code Fee	" Producing Method Code Pump	" Gas Connection Date N/A			" C-129 Permit Number		" C-129 Effective Date		" C-129 Expiration Date

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
015694	Navajo Ref. Co. PL Division P O Box 159 Artesia NM 88210-0159	2804640	O	E 13-18S-26E Tank Battery
009171	GPM Gas Corp. 4044 Penbroook Odessa TX 79762	2057130	G	E 13-18S-26E Tank Battery

RECEIVED
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IV Produced Water

IV. Produced Water

POD 2057150	E 13-18S-26E	Tank Battery
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V. Well Completion Data

Completion Data				
" Spud Date	" Ready Date	" TD	" FBTD	" Perforations
" Hole Size	" Casing & Tubing Size	" Depth Set	" Sacks Cement	

VI. Well Test Data

" Date New Oil	" Gas Delivery Date	" Test Date	" Test Length	" Tbg. Pressure	" Csg. Pressure
" Choke Size	" Oil	" Water	" Gas	" AOF	" Test Method

"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:

Title:

Date:

^a If this is a change of operator fill in the OGRID number and name of the previous operator
017195 - PENNZOIL PETROLEUM CO.

Previous Operator Signature

Printed Name _____

Time

Date _____

ROY R. JOHNSON

SR. ACCOUNTANT

02/01/95