District I PO Box 1980, Hobbs, NM 88241-1980

District II 811 South First, Artesia, NM 88210

District III

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office

1000 Rio Braz District IV					Santa F						5 Cop		
2040 South P	acheco, Sar R	nta Fe, NM 87505 EQUEST	FOR AL	I OWAF				۸۲۱۸	N TO TRA		AMENDED REPO		
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Melrose Operating Co.V P.O. Box 5061											184860		
							³ Reason for Filing Code						
4.0	Pl Number		and, Texas 15) 685-17			- <u>-</u>			Change	of Operato	r 12-01-99		
30 - 0 <i>1</i> S		م مر	5 Pool Name				⁶ Pool Code						
	operty Code		® Property Name					<u></u>	クラススス [®] Well Number				
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JI or lot no.	Surface Section	Location	Range	Lot Idn	T #		1						
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11	<u> </u>	Hole Locat	ion		100	00	1 74		1780	L KI	Lady		
Ul or lot no.	Section	Township	Range	Lot Idn	Feet fro	m the	North/Sout	h Line	Feet from the	East/West	line County		
¹² Lse Code	13 Produci	ng Method Code	14 Con (Connection Da	-1- 15	0.400.5							
	110000	ng Method Code	Gas	Connection Da	ate 15	C-129 Perr	nit Number	1	⁶ C-129 Effective D	Pate	¹⁷ C-129 Expiration Da		
II. Oil ai	nd Gas	Transporte	rs	· · · · · · · · · · · · · · · · · · ·	l			<u> </u>					
18 Transport	ter	19 Tr	ime	ne ²⁰ POD ²¹ C			1 O/G	G 22 POD ULSTR Location					
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		tion Data	_										
²⁵ Spud	Date	²⁶ Rea		²⁷ TD		²⁸ PBTD		²⁹ Perforat	ions	30 DHC, DC, MC			
	³¹ Hole Size												
Tible Size			³² Casing & Tubing Size			³³ Depth Se				34 (Sacks Cement		
													
·							-						
I. Well	Test Da	ata		·		!		_					
35 Date Ne		36 Gas Delive	ery Date	³⁷ Test	Date	3	8 Test Length		³⁹ Tbg. Press	sure	⁴⁰ Csg. Pressure		
⁴¹ Choke Size		⁴² Oil		⁴³ Water		44 Gas					1 2 3 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		
									⁴⁵ AOF		46 Test Method		
7 I hereby cert	tify that the	rules of the Oil Co	annuation F	Side la barra la		1							
complied wit	th and that t	he information givedge and belief.	ven above is	true and com	plete		OIL	_ COI	NSERVATIO	ON DIVIS	SION		
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inted name:	Michael	Color Con	ay_			Title:		CIS.	trict ii Sue	E THE STATE			
tle: Vice President						Approval Date:							
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	nge of oper	ator fill in the OG		and name of t	the previous	s operator	71	_					
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	Previous #	perator Signatur	e		<u> </u>	Printed	Name			Title	/ Date		
	HUR		John Pool				Vice President 17/77/99						