District I

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

1000 Rio Brazos Rd., Aztec, NM 87410

5/22/00

Previous Operator Signature

Date:

District III

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe. NM 87505

State of New Mexico

Energy, Minerals & Natural Resources Department

2155

Form C-104 Revised October 18, 1994 Instructions on back

Submit to Appropriate District Office

5 Copies

1000 MO BIAZ	os Ru., Aziec,	14141 0/410			Santa 1	c, INIVI	3/303							
District IV											X	AMEND	ED REPORT	
2040 South Pa														
<u>I.</u>	REQUE	ST FOR	ALL(DWABL!	E AND AU	THORI	ZATI	ON 1	TO TRA	NSP	ORT			
		² OG				² OGR	RID Number							
	L.P.	· ·					6137							
		³ Reason for F				for Fil	iling Code							
							/2000							
1	Number			⁵ Pool Name								⁶ Pool Code		
30-0		ļ	Red Lak						51300					
7 Prope						rty Name				Well Number				
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	tom Hole	Locatio												
UI or lot no. Section Township		Range Lot.Idn		Feet from the	n the North/Sout		th Line Feet from the		he East/West Line		County			
12	12				<u> </u>									
Lse Code	12 Lse Code 13 Producing Method Co		de Gas Connec		ection Date	15 C-129 Per	mit Numl	umber 16 C-129		Effective Date		17 C-129 Expi	ration Date	
TITL O'I	1.0								l., ., <u></u>					
	nd Gas T	ranspor	ters											
18 Trans		¹⁹ Transporter Name				POD		24 O/G		22 POD ULSTR Location				
OGRID			TAIL .	and Addr						and Description				
7440 EOT			1 I 9. Box 1188				28218	38	0					
		1. BOX 1188 1ston, TX 77251												
9171	GPN	A Gas Co		2821839			1							
			Penbro											
		Ode	ssa, TX	79762										
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IV. Prod	uced Wat	er	· · · · · · · · · · · · · · · · · · ·										·	
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	2821840					1 OD CDB	I IX LOCAL	ion wid	Description					
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31 Hole Size		•									Bile, Be, 1		nC .	
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VI. Well		ì												
35 Date 1	New Oil	36 Gas E	elivery Date 37		37 Test Date	, ,	38 Test Leng		gth 39 ·		ressure	40 Csg. Pressure		
4.67			P 0.11											
11 Choke Size		"	⁴² Oil ⁴³ Wa				" G	" Gas		45 AOF		⁴⁸ Test Method		
ØI harabar	4h 44 1 -	-fst- 0'' C		4:	<u> </u>									
"I hereby certify					•	¹	^		^	7 A	ON	01027	·	
with and that the		iven above i	s true and	complete to the	ne best of my		U	ıl C	JNSEK\	ATI	ON DIVI	SION		
knowledge and Signature:	ociiei.	1 #	$Y \setminus U$	m /				ÇI)	PFRVIS	OR	DISTRIC	T II		
Printed Name:	CYS	ve McNal	lv	$+\!$		Approved Title:	DY:	- 30						
Title: District Manager							Approval Date: 3-1-00							
# /2 C			-0			Approvat .	vaic:			<u> </u>	U			

Title

Date

Printed Name

(405) 235-3611

Phone: If this is a change of operator fill in the OGRID number and name of the previous operator