## District I

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

District IV

## State of New Mexico Linergy, Minerals & Natural Resources Department

Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

## OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

X AMENDED REPORT

| 2040 South Pacheco                               | o, Santa Fe, N                         | IM 87505                      |                                   |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
|--|--|-------------------------------|-----------------------------------|-------------------------------------|-------------|-----------------------------------|---------------|---------------|--|------------------------------|----------------------------------|-----------------|--|
| I.   |  |                               | Γ FOR A                           | LLOWAB                              | BLE A       | ND AU                             | J <b>THO</b>  | RIZAT         | ION TO TR                                | ANSPO                        | ORT                              |                 |  |
| Operator name and Address                        |  |                               |                                   |                                     |             |                                   |               |               | <sup>2</sup> OGRID Number                |                              |                                  |                 |  |
| KERR-MCGEE                                       |  |                               |                                   |                                     | 3 Par       | eason for Filing Code eff 7/1/99  |               |               |  |                              |                                  |                 |  |
| P.O. Box 2                                       |  |                               |                                   |                                     |             |                                   |               |               | CHANGE OF TRANSPORTER (OIL)              |                              |                                  |                 |  |
| Dallas, TX                                       | API Number                             |                               |                                   |                                     |             | <sup>5</sup> Pool Na              | me            |               | T CHANGE OF                              | 1100101                      | 6 Pool                           |                 |  |
|  |  | :4                            | INDIAN BASIN MORROW (PRORATED GAS |                                     |             |                                   |               |               | 5)                                       |                              | 789                              | 60              |  |
| 30-0   | 015 - 2565<br>perty Code               | 04                            | 8 Property Name                   |                                     |             |                                   |               | 9 Well Number |  |                              |                                  |                 |  |
|  | 24520                                  |                               |                                   |                                     |             | LOWE STATE                        |               |               |  |                              | 2                                |                 |  |
|  |  | Location                      | <br>1                             |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| UL or lot no.                                    | Section                                | Township                      | Range                             | Lot. Idn                            | Feet fro    | om the                            | North/So      | outh Line     | Feet from the                            | East/West                    | line                             | County          |  |
| М  | 36                                     | 21\$                          | 23E                               |                                     | 3           | 330 SOUTH                         |               | UTH           | 330                                      | WEST                         | WEST ED                          |                 |  |
| 11 Bottom Hole Lo                                |  |                               | cation                            |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| UL or lot no.                                    | Section                                | Township Range                |                                   | Lot. Idn                            | Feet fr     | om the                            | North/So      | outh Line     | Feet from the                            | East/West line               |                                  | County          |  |
|  |  |                               | <u> </u>                          |                                     | L           |                                   | <u></u>       |               | 6  |                              | 17 0 100                         | 120 Fr. 1       |  |
| 12 Lse Code                                      |  |                               | ode 14 Gas Connection Date        |                                     |             | <sup>15</sup> C-129 Permit Number |               |               | C-129 Effective Date 17 C-129 Expiration |                              |                                  | Expiration Date |  |
|  |  | TA                            |                                   |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| III. Oil an                                      | d Gas T                                |                               |                                   |                                     | <del></del> | 20 POD                            |               | 21 O/G        | 22 PO                                    | D ULSTR L                    | ocation                          | :               |  |
|  |  |                               | ansporter Name<br>and Address     |                                     |             | 20 POD 21 O                       |               |               | and Description                          |                              |                                  |                 |  |
| 138648 AM  |  | CO PL ITD                     | (TRKS)                            |                                     |             |                                   | 2022710       |               | M 36 21S 23E                             |                              |                                  |                 |  |
| 130040   | NW AVENU                               |                               |                                   | 2022710                             |             |                                   | 11 20 512 521 | _             |  |                              |                                  |                 |  |
| LEVELLAND TE                                     |  |                               |                                   |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| 015629 NATURAL GAS<br>P 0 B0X 7528               |  |                               | PIPELINE CO OF AMERICA            |                                     |             | 2022730 G                         |               |               | M 36 21S 23E                             |                              |                                  |                 |  |
|  | ###################################### |                               | NOIS 60690-6312                   |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
|  | 0.72                                   |                               |                                   |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
|  |  |                               |                                   |                                     |             |                                   |               |               |  |                              | 外                                |                 |  |
|  |  | <u></u>                       |                                   |                                     |             |                                   |               |               |  |                              |                                  | ,               |  |
|  |  |                               |                                   |                                     |             |                                   |               |               |  | (t.)<br>/ 11)                |                                  |                 |  |
|  |  |                               |                                   |                                     |             |                                   |               |               |  |                              | 467 34                           |                 |  |
| IV. Produ  | ced Wat                                | er                            |                                   |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| <sup>23</sup> POI                                | )                                      |                               |                                   |                                     | 24          | POD ULS                           | TR Location   | on and Des    | scription                                | 1                            | $(x,y) \ni_{j}$                  |                 |  |
| 2022   | 750                                    | M 36 2                        | LS 23E                            |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| V. Well C  |  | y Date 27 TD                  |                                   |                                     | 28 PBTD     |                                   |               | 29 Perfora    | tions                                    | ns <sup>30</sup> DHC, DC, MC |                                  |                 |  |
| <sup>25</sup> Spud Da                            | ite                                    | <sup>26</sup> Ready Date      |                                   | 2, 10                               |             | 20 PE                             |               | )ID Felicial  |  | nois Dire, be, ite           |                                  |                 |  |
| 31 H   | ole Size                               | <del></del>                   | 32 Casing & Tubing Size           |                                     | <del></del> | 33 Depth Set                      |               |               | <sup>34</sup> Sacks Cement               |                              |                                  | nt              |  |
|  |  |                               | <u> </u>                          |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
|  |  |                               |                                   |                                     |             | <del>-</del>                      |               | ····          |  |                              |                                  |                 |  |
|  | · <del>_</del>                         |                               | AP                                |                                     |             | <del>-  </del>                    |               |               |  |                              |                                  |                 |  |
|  |  |                               |                                   |                                     |             | -                                 |               |               |  |                              |                                  |                 |  |
|  |  |                               |                                   |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| VI. Well 7                                       |  |                               |                                   | 27                                  |             | 10 -                              | Fest Lengt    | <del></del> . | 30 m P                                   |                              | 40. С                            | D               |  |
| 35 Date New                                      | Oil                                    | <sup>36</sup> Gas Delive      | ry Date                           | Date 37 Test Date                   |             | e 38                              |               | h             | <sup>39</sup> Tbg. Pressur               | e                            | 40 Csg. Pressure  46 Test Method |                 |  |
|  |  | - 40                          |                                   |                                     |             |                                   | 14 -          |               | 45 4 0 7                                 |                              |                                  |                 |  |
| <sup>41</sup> Choke Siz                          | :e                                     | <sup>42</sup> Oil             |                                   | <sup>43</sup> Water                 |             | 44 Gas                            |               |               | <sup>45</sup> AOF                        |                              | l est Method                     |                 |  |
|  |  |                               |                                   |                                     |             |                                   |               |               | ·  |                              |                                  |                 |  |
| <sup>47</sup> I hereby certi<br>complied with ar | fy that the rund that the inf          | les of the Oil formation give | Conservation<br>on above is tru   | Division have be<br>se and complete | to l        |                                   | (             | OIL CO        | NSERVATIO                                | N DIVISI                     | ON                               |                 |  |
| the best of my kr                                |  |                               | )                                 |                                     | - 11        | Approved                          | by:           |               |  |                              |                                  |                 |  |
| Signature: Printed name:                         | algu                                   | 1 19                          | 7                                 |                                     |             | Title                             |               |               | GHED BY TIE                              | <del>: 19. GU</del>          | <del>20</del>                    |                 |  |
| EDGAR PERI                                       | EZ                                     |                               | 0                                 |                                     |             | Title:                            | OISTI         | nct ii        | SUPERVISOR                               |                              |                                  |                 |  |
| Title:   |  |                               |                                   |                                     |             | Approval l                        | Date:         |               |  |                              |                                  |                 |  |
| PRORATION ANALSYT  Date: 10/1/00                 |  |                               | Phone: 070 715 4600               |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| 10/1/99 9/2 /13-4003                             |  |                               |                                   |                                     |             |                                   |               |               |  |                              |                                  |                 |  |
| 48 If this is a cl                               | nange of oper                          | rator fill in the             | OGRID num                         | ber and name of                     | f the prev  | ious opera                        | itor          |               |  |                              |                                  | 10/1/99         |  |
|  |  | Printed Name                  |                                   |                                     |             |                                   |               | Date          |  |                              |                                  |                 |  |