District I District II 811 South First, Artesia, NM 88210 District III

Title:

Date:

1995

Previous Operator Signature

Phone: 505-287-2144

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

State of New Mexico

Euergy, Minerals & Natural Resources Department ERVA VED

Form C-104 PO Box 1980, Hobbs, NM 88241-1980 Revised October 18, 1994 RECT. YED OIL CONSERVATION DIVISION

4 Appropriate District Office 5 Copies 2040 South Pachecog5 DE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 AMENDED REPORT District IV 2040 South Pacheco, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT 1 Operator name and Address ² OGRID Number Farris Mines 007784 Box 687 ³ Reason for Filing Code Grants, NM 87020 1995 Pool Name ⁴ API Number ' Pool Code 30-031 05265 Seven Lakes Menefee 55660 ' Well Number ⁷ Property Code 1 Property Name 004235 Farris 10 Surface Location Ul or lot no. Section Township Lot.Idn Feet from the North/South Line Feet from the East/West line Range County 950 330 Fee South Éast cKinley 11 Bottom Hole Location East/West line UL or lot no. Section Township Lot Idn Feet from the North/South line Feet from the ¹⁴ Gas Connection Date 15 C-129 Permit Number 12 Lac Code 13 Producing Method Code 14 C-129 Effective Date 17 C-129 Expiration Date III. Oil and Gas Transporters 28 POD 23 O/G 22 POD ULSTR Location Transporter OGRID 19 Transporter Name and Address and Description Giant Oil Co. 9018 959110 Ω 6001 U. S. Highway 64 Bloomfield, NM 874,3 WILL GOING DING V. Produced Water DIES. 3 n POD ²⁴ POD ULSTR Location and Description V. Well Completion Data n TD ²⁴ Ready Date 25 PRTD 29 Perforations 25 Spud Date M DHC, DC,MC 31 Hole Size 22 Casing & Tubing Size 33 Depth Set 34 Sacks Cement VI. Well Test Data M Date New Oil " Gas Delivery Date " Test Date M Test Length "Tbg. Pressure " Cag. Pressure 4º Oil 4 Gas 4 Choke Size 49 Water " AOF 4 Test Method " I hereby certify that the rules of the Oil Conservation Division have been complied OIL CONSERVATION DIVISION with and that the information given above is true and complete to the best of my Signature: Title: DEPUTY OIL & GAS INSPECTOR, DIST. #3 Printed name: Ethel M

Approval Date:

Printed Name

2

Title

Date

NOV