

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

☐ **AMENDED REPORT**

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address ENERGEN RESOURCES CORPORATION 2198 Bloomfield Hwy Farmington NM 87401		² OGRID Number 162928
		³ Reason for Filing Code CH 10-1-98
⁴ API Number 30-0 30-045-20892	⁵ Pool Name BLANCO PICTURED CLIFFS	⁶ Pool Code 72359
⁷ Property Code 21327	⁸ Property Name MANSFIELD	⁹ Well Number 10

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
K	19	30N	09W		1850	S	720	W	SJ

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
¹² Lse Code F	¹³ Producing Method Code		¹⁴ Gas Connection Date		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

III. Oil and Gas Transporters

18 Transporter OGRID	19 Transporter Name and Address	20 POD	21 O/G	22 POD ULSTR Location and Description

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DIST. 3

IV. Produced Water

23 POD	24 POD ULSTR Location and Description

V. Well Completion Data

25 Spud Date		26 Ready Date	27 TD	28 PBTB	29 Perforations	30 DHC, DC, MC
31 Hole Sie		32 Casing & Tubing Size	33 Depth Set		34 Sacks Cement	

VI. Well Test Data

35 Date New Oil	36 Gas Delivery Date	37 Test Date	38 Test Length	39 Tbg. Pressure	40 Csg. Pressure
41 Choke Size	42 Oil	43 Water	44 Gas	45 AOF	46 Test Method

47 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:		OIL CONSERVATION DIVISION Approved by: <i>[Signature]</i>	
Printed name: Original signed by Joe Niederhofer		Title: SUPERVISOR DISTRICT #3	
Title: General Manager		Approval Date: OCT 1 1998	
Date: 17-Sep-98	Phone: 505-325-6800		

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Taurus Exploration U.S.A., Inc. #162928

1-Oct-98

Previous Operator Signature

Printed Name

Title

Date _____