District 1 PO Box 1980, Hobbs, NM 88241-1980

## State of New Mexico

Energy, Minerals, & Natural Resources Department

Form C-104 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office

5 Copies

P.O Drawer DD, Artesia, NM 88211-07-9
District III

Previous Operator Signature

OIL CONSERVATION DIVISION PO Box 2088

1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87504-2088 ☐ AMMENDED REPORT District IV PO Box 2088, Santa Fe, NM 87504-2018 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OGRID Number Operator Name and Address 14538 Burlington Fesources Cil & Gas Reason for Filing Code PO Box 4289 Farmington, NM 87499 co - 7/11/96 Pool Code API Number <sup>5</sup> Pool Name 71560 BARKER CREEK PARADOX (GAS) 30-045-29156 Well Number Property Code <sup>3</sup> Property Name #24 UTE 007618 II. 10 Surface Location North/South Line Feet from the East/West Line Lot.Idn Feet from the UI or lot no. Section Township Range N SAN JUAN W 014W 1935 1630 20 032N Ε 11 Bottom Hole Location East/West Line Lot.Idn Feet from the North/South Line Feet from the County Section Township Range UI or lot no. 16 C-129 Effective Date <sup>a</sup> C-129 Expiration Date <sup>4</sup>Gas Connection Date 5 C-129 Permit Number Producing Method Code 12 Lse Code III. Oil and Gas Transporters 22 POD ULSTR Location 20 POD 21 O/G Transporter Name Transporter and Address and Description OGRID G E-20-T032N-R014W 24896 12200 N PECOS ST SUITE 230 DEMVER. CC 80234 Giant Industries 5764 US Hwy 64 E-20-T032N-R014W 2815460 0 9018 Farmington, NM 87491 IV. Produced Water <sup>24</sup> POD ULSTR Location and Description 2: POD V. Well Completion Data 28 PBTD Perforations 25 Spud Date 24 Ready Date 33 Sacks Cement tc Hole Size 31 Casing & Tubing Size 2 Depth Set VI. Well Test Data Test Length Scale Csg. Pressure Gas Delivery Date 38 Tbg. Pressure 4 Date New Oil Test Date "Test Method 43 Gas 44 AOF · Oil 42 Water 40 Choke Size 46 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 knowledge and belief Frank T. Chavez Signature: Line Lies Approved by: Printed Name **District Supervisor** Title: Title: July 11, 1996 Approved Date: Production Associate Date: 7/11/96 Phone 4) If this is a change of operator fill in the OGRID number and name of the previous operator

Title

Production Associate

Printed Name
Dolores Diaz

Date

7:11:96