

District II
 District III
 District IV

State of New Mexico
 Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
 PO Box 2088
 Santa Fe, NM 87504-2088

Form C-1
 Revised February 10, 1994
 Instructions on back
 Submit to Appropriate District Office
 5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address SOUTHWEST ROYALTIES, INC P.O. BOX 11390 MIDLAND, TEXAS 79702		OGRID Number 21355
Reason for Filing Code request to sell 182 bbls of skim oil form SWD facility 8-2-94		
API Number 30 - 025-23664	Pool Name JALMAT TANSILL YT 7 RVRS	Pool Code 79240
Property Code 10624	Property Name CITIES FEDERAL	Well Number 1

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West line	County
L	20	22S	36E		2310	SOUTH	330	WEST	LEA

III. Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County

Lea Code	Producing Method Code	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date
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III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
20262	SANDHILLS PETROLEUM, INC. P.O. BOX 771 HOBBS, NM 88240	2809438	O	L-20-22S-36E

IV. Produced Water

POD 2809438	POD ULSTR Location and Description L-20-22S-36E
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

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: *Kate Ellison*
 Printed name: KATE ELLISON
 Title: REGULATORY ASST

Date: 8-15-94 Phone: (915) 686-9927

OIL CONSERVATION DIVISION
 Approved by: ORIGINAL SIGNED BY JERRY SEXTON
 DISTRICT I SUPERVISOR
 Title:
 Approval Date: AUG 17 1994

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

Previous Operator Signature	Printed Name	Title	Date
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RECEIVED

AUG 16 1994

JOHN HENNINGSON
OFFICE