

District I
 PO Box 1960, Hobbs, NM 88241-1960
 District II
 70 Drawer DD, Artesia, NM 88211-0719
 District III
 1000 Rio Bravo Rd., Aztec, NM 87410
 District IV
 PO Box 2088, Santa Fe, NM 87504-2088

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

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Gold Star SWD Ltd. Co. Box 1480 Bunice, N.M. 88231		OGRID Number 148431	Reason for Filing Code To Sell skim oil 300 BBL
AJT Number 30-025-10500	Pool Name SWD San Andres	Pool Code 96121	
Property Code 17470	Property Name Christmas	Well Number 003	

II. Surface Location

UL or lot no.	Section	Township	Range	Lot/Ida	Feet from line	North/South Line	Feet from line	East/West line	County
B	28	22S	37E		330	N	2310	E	025

III. Bottom Hole Location

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

Law Code P	Producing Method Code SWD	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
16872	Sundance	2816488	0	Same

IV. Produced Water

POD	POD ULSTR Location and Description

V. Well Completion Data

Spud Date	Ready Date	TD	PSTD	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	AOP	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: Royce Crowell

Printed name: Royce Crowell

Title: Manager

Date: 3/2/98

Phone: 394-2504

OIL CONSERVATION DIVISION
 ORIGINAL SIGNED BY CHRIS WILLIAMS
 DISTRICT I SUPERVISOR

Approved by: _____

Title: _____

Approval Date: 4/2/98

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: _____