Revised October 186/1994

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

2040 South Pacheco Santa Fe, NM 87505

•	Revised Oct	lober i	871	994
	Instru	ctions	M t	ack
Submit to	Appropriate	DistrA	et 'Af	fice
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District IV 2040 South Paci I			EOD A	IIOWAI	DIE ANI	II	THAN	7 - A	·011 mo		MENDED REPORT	
.		EQUEST	Operator na	ume and Addres	SLE AIN	ID AU	THOR	JZATI	ON TO TE	' OGRID N		
M.E.W. ENTERPRISE 505-627-2065								160190				
Roswell, NM 83201								Reason for Filing Code CH (4-1-99)				
	Number 5 – 60634		Bull'	s Eye-San		Pool Name					Pool Code	
⁷ Pr	roperty Code			5 Lige Dan		Troperty Name				03190		
2:	3787 24	533 °	'Brien	Deming 6		.,,				1	* Well Number	
II. 10 S	Surface	Location Township	Range	Lot.ldn	15.46					1		
M	6	85	29E	Lot.1dh	Feet from		North/So Sout	outh Line Lh	Feet from the 330	East/West I	ine County CHAVES	
¹¹ J	Bottom J	Hole Loca	ation	<u></u>	<u> </u>				330	Mese.		
UL or lot no.	Section	Township	Range	Lot idn	Feet from	n the	North/S	outh line	Feet from the	East/West E	ine County	
12 Lse Code	13 Produci	ng Method Cod	ie l ¹⁴ Gas	Connection Date	10 1 5 C	-129 Permi						
P				The state of the s		·LES PERMI	t Number	"	C-129 Effective	Date '	C-129 Expiration Date	
III. Oil a								!				
" Transpor OGRID	rter	19 7	Transporter and Addre			" PO)	³¹ O/G		POD ULSTI		
3401	9	Phillip	1566		1/	0650	610	12		and Descr	spaon	
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Strategiere Stratege von					53.46				6	· oco	ARTESIA &	
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	uced Wa	iter						1.2		18-50 SE	2C93CGZ VLGQ	
3 1	POD					POD UL	STR Loca	tion and D				
V. Well (Clot	· D-4-		-					··	·		
	Complet	ion Data	leady Date		" TD		2 00		T = 2 = 2			
					- 10		* PB	TTD	²⁹ Perform	itions	* DHC, DC,MC	
	¹¹ Hole Size		n (Casing & Tubin	ng Size	<u> </u>)	Depth Se	<u> </u>	jų ,	Sacks Cement	
										Posto	A TO.3	
										4-30-99		
										Chi	000	
VI. Well	Test Da		<u> </u>					-		.0		
Date No		^M Gas Del	ivery Date	" Te	st Date	Т	" Test Le		T ====			
			•				- lex D	ar Gra	"Tbg. P	resoure	" Cag. Pressure	
41 Choke	e Size	44 (Oii	4.4	Water		" Ge		* AC)F	" Test Method	
⁴⁷ I hereby certi	fy that the mi	es of the Oil Co	Opervetion F	Division have bee								
with and that the knowledge and I	e information	given above is	true and com	aplete to the best	of my		O	L CO	NSERVAT	ION DIV	/ISION	
Signature:	Aus		21/	42		Approve	l by:	ORIGIN	IAL SIGNED	BY TIM W		
Printed name:	Russe	ell White	<i>2,502.</i> ed .			Title:		DISTRI	CT II SUPER	VISOR	ficx !	
Title:	Agent					Approva	Date:		45	0.0		
Date: 3-	-10-99		Phone: 5	505-627-2	065				<u>4-8 -</u>	79		
" If this is a c	hange of ope	erator fill in the	e OGRID nu	mber and name		vious open	tor					
·	(tam)	Portor Signat	laster	<u> </u>		ry Mi	Uspau	ıah	F	residen	t_ 3-8-99	
		Posture Octave	OGRI	D: 1617	18 Wi	Printe 110w I	d Name Pipeli	.ne Cor	npany	Title	Date	