

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
811 South First, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

DISTRICT IV
2040 South Pacheco, Santa Fe, NM 87505

STATE OF NEW MEXICO
Energy, Minerals & Natural Resources

CISF
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OP

Form C-104
Revised March 25, 1999

Submit to Appropriate District Office
5 Copies

_____ AMENDED REPORT

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator Name and Address Elk Oil Company P. O. Box 310 Roswell, New Mexico 88202-0310		2. OGRID Number 7147
		3. Reason for Filing Code NW
4. API Number 30-005-63505	5. Pool Name Race Track, Devonian SE	6. Pool Code 96811
7. Property Code 30593	8. Property Name RANDALL FEE	9. Well Number 1

II. 10. Surface Location

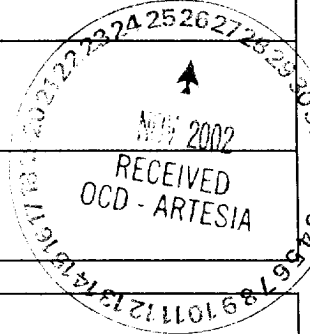
UL or Lot No.	Section	Township	Range	Lot Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
I	25	10S	27E		1650	SOUTH	330	EAST	CHAVES

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
I	25	10S	27E		1650	SOUTH	330	EAST	CHAVES
12. Lse Code P	Producing Method Code F	14. Gas Connection Date N/A		15. C-129 Permit Number		16. C-129 Effective Date		17. C-129 Exp 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
138648	Amoco Pipeline ITD 502 North West Avenue Levelland, Texas 79336	2833491	0	



IV. Produced Water

23. POD 2833492	24. POD ULSTR Location and Description
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V. Well Completion Data

25. Spud Date	26. Ready Date	27. TD	28. PBTD	29. Perforations
10/10/02	11/24/02	6855'	6855'	TD
30. Hole Size	31. Casing & Tubing Size	32. Depth Set		33. Sacks Cement
17 1/4"	13 3/8"	301'		400 sxs
12 1/4"	8 5/8"	1552'		650 sxs
7 7/8"	5 1/2"	6840'		600 sxs
	2 3/8"	6770'		

VI. Well Test Data

34. Date New Oil	35. Gas Delivery Date	36. Test Date	37. Test Length	38. Tbg. Pressure	39. Csg. Pressure
11/20/02	N/A	11/24/02	24	20#	Packer
40. Choke Size	41. Oil	42. Water	43. Gas	44. AOF	45. Test Method
48/64"	96	19	N/A	N/A	N/A

46. 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: ELK OIL COMPANY
Printed name: Joseph J. Kelly
Title: President
Date: November 25, 2002 Phone: 505-623-3190

Approved By: OIL CONSERVATION DIVISION
ORIGINAL SIGNED BY TIM W. GUMM
DISTRICT II SUPERVISOR
Approval Date: DEC 02 2002

47. 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

New Mexico Oil Conservation Division
C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°.
Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

1. Operator's name and address
2. Operator's OGRID number. If you do not have one, it will be assigned and filled in by the District office.
3. Reason for filing code from the following table:

NW	New Well
RC	Recompletion
CH	Change of Operator
AO	Add oil/condensate transporter
CO	Change oil/condensate transporter
AG	Add gas transporter
CG	Change gas transporter
RT	Request for test allowable (Include volume requested)

If for any other reason write that reason in this box.
4. The API number of this well.
5. The name of the pool for this completion.
6. The pool code for this pool.
7. The property code for this completion.
8. The property name (well name) for this completion.
9. The well number for this completion.
10. The surface location of this completion. NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.
11. The bottom hole location of this completion.
12. Lease code from the following table:

F	Federal
S	State
P	Fee
J	Jicarilla
N	Navajo
U	Ute Mountain Ute
I	Other Indian Tribe
13. The producing method code from the following table:

F	Flowing
P	Pumping or other artificial lift
14. MM/DD/YY that this completion was first connected to a gas transporter.
15. The permit number from the District approved C-129 for this completion.
16. MM/DD/YY of the C-129 approval for this completion.
17. MM/DD/YY of the expiration of C-129 approval for this completion.
18. The gas or oil transporter's OGRID number.
19. Name and address of the transporter of the product.
20. The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number, the district office will assign a number and write it here.
21. Product code from the following table:

O	Oil
G	Gas
22. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD", etc.)
23. The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number, the district office will assign a number and write it here.
24. The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.).
25. MO/DA/YR drilling commenced.
26. MO/DA/YR this completion was ready to produce.
27. Total vertical depth of the well.
28. Plugback vertical depth.
29. Top and bottom perforation in this completion or casing shoe and TD if openhole.
30. Write in 'DHC' if this completion is downhold commingled with another completion or 'MC' if there is more than one non-commingled completion in this well bore. Attach actual completed well bore diagram
31. Outside diameter of the casing and tubing.
32. Depth of casing and tubing. If a casing liner, show top and bottom.
33. Number of sacks of cement used per casing string.
34. MM/DD/YY that new oil was first produced.
35. MM/DD/YY that gas was first produced into a pipeline.
36. MM/DD/YY that the following test was completed.
37. Length in hours of the test.
38. Flowing tubing pressure - oil wells
Shut-in tubing pressure - gas wells
39. Flowing casing pressure - oil wells
Shut-in casing pressure - gas wells
40. Diameter of the choke used in the test.
41. Barrels of oil produced during the test.
42. Barrels of water produced during the test.
43. MCF of gas produced during the test.
44. Gas well calculated absolute open flow in MCF/D.
45. The method used to test the well:

F	Flowing
P	Pumping
S	Swabbing

If other method please write it in.
46. The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report.
47. The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person.