

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Bravo Rd, Aztec, NM 87410  
Aztec, NM, 87410  
District IV  
PO box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department  
  
OIL CONSERVATION DIVISION  
P.O. BOX 2088  
SANTA FE, NM 87504-2088

Form C-104  
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 <b>RAY WESTALL P.O. BOX 4 LOCO HILLS, NM 88255</b>		OGRID NUMBER <b>018862</b>
		REASON FOR FILING CODE <b>CO EFFECTIVE 01/01/95</b>
API NUMBER <b>30-015- 22356</b>	POOL NAME <b>SHUGART YATES SEVEN RIVERS QUEEN GRAYBURG</b>	POOL CODE <b>56439</b>
PROPERTY CODE <b>011644</b>	PROPERTY NAME <b>HINKLE B FEDERAL</b>	WELL NUMBER <b>009</b>

II. SURFACE LOCATION

UL OR LOT NO. <b>F</b>	SECTION <b>26</b>	TOWNSHIP <b>18S</b>	RANGE <b>31E</b>	LOT.IDN	FEET FROM THE <b>2310</b>	NORTH/SOUTH LINE <b>NORTH</b>	FEET FROM THE <b>2310</b>	EAST/WEST LINE <b>WEST</b>	COUNTY <b>EDDY</b>
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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
LSE CODE	PRODUCING METHOD CODE		GAS CONNECTION DATE		C-129 PERMIT NUMBER		C-129 EFFECTIVE DATE	C-129 EXPIRATION DATE	

III. OIL AND GAS TRANSPORTERS

TRANSPORTER OGRID	TRANSPORTER NAME AND ADDRESS	POD	O/G	POD ULSTR LOCATION AND DESCRIPTION
<b>5108</b>	<b>CONOCO 10 DESTA DRIVE STE 550 MIDLAND, TX 79705</b>	<b>2601710</b>	<b>O D</b>	<b>26 18S 31E</b>
<b>005097</b>	<b>CONOCO P.O. BOX 1267 PONCA CITY, OK 74003</b>	<b>2601730</b>	<b>G D</b>	<b>26 18S 31E</b>

IV. PRODUCED WATER

POD <b>2601750</b>	POD ULSTR LOCATION AND DESCRIPTION <b>D 26 18S 31E</b>
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V. WELL COMPLETION DATA

SPUD DATE	READY DATE	TD	PBTD	PERFORATIONS
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET	SACKS CEMENT

V. 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: <i>Juanel Harper</i> Printed name: <b>JUANEL HARPER</b> Title: <b>PRODUCTION ANALYST</b> Date: <b>01/23/95</b> Phone: <b>(505) 677-2370</b>		OIL CONSERVATION DIVISION  <b>SUPERVISOR, DISTRICT II</b> Approved by: Title: Approval Date: <b>JAN 27 1995</b>	
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