

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

Form C-104  
 Revised February 10, 1994  
 Instructions on back

OIL CONSERVATION DIVISION  
 P.O. BOX 2088  
 SANTA FE, NM 87504-2088

Submit to Appropriate District Office

5 Copies

AMENDED REPORT

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 SP*

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 1-1-95</b>
API NUMBER <b>30-015-22363</b>	POOL NAME <b>SHUGART YATES 7RVRS QUEEN GRAYBURG</b>	POOL CODE <b>56439</b>
PROPERTY CODE <b>011644</b>	PROPERTY NAME <b>HINKLE B FEDERAL</b>	WELL NUMBER <b>010</b>

II. SURFACE LOCATION

UL OR LOT NO.	SECTION	TOWNSHIP	RANGE	LOT.IDN	FEET FROM THE	NORTH/SOUTH LINE	FEET FROM THE	EAST/WEST LINE	COUNTY
<b>M</b>	<b>27</b>	<b>18S</b>	<b>31E</b>		<b>330</b>	<b>SOUTH</b>	<b>330</b>	<b>WEST</b>	<b>EDDY</b>

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	
<b>F</b>									

III. OIL AND GAS TRANSPORTERS

TRANSPORTER OGRID	TRANSPORTER NAME AND ADDRESS	POD	O/G	POD ULSTR LOCATION AND DESCRIPTION
<b>5108</b>	<b>CONOCO INC 10 DESTA DRIVE STE 550 MIDLAND, TX 79705</b>	<b>2601510</b>	<b>O J</b>	<b>27 18S 31E</b>
<b>005179</b>	<b>GPM 1040 PLAZA OFFICE BUILDING BARTLESVILLE, OK 74004</b>	<b>2601530</b>	<b>G J</b>	<b>27 18S 31E</b>
				<i>JAN 6 '95</i>
				<i>...</i>

IV. PRODUCED WATER

POD	POD ULSTR LOCATION AND DESCRIPTION
<b>2601550</b>	<b>J 27 18S 31E</b>

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: *Juanel Harper*

Printed name: **JUANEL HARPER**

Title: **PRODUCTION ANALYST**

Date: **01/03/95**

Phone: **(505) 677-2370**

OIL CONSERVATION DIVISION

*SUPERVISOR, DISTRICT II*

Approved by:

Title:

Approval Date:

**JAN 12 1995**

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