1625 N. French Dr., Hobbs, NM 88240

11/24/2004

(505)394-2581

State of New Mexico Energy, Minerals & Natural Resources

Form C-104 Reformatted July 20, 2001

Submit to Ap	ppropriate	District C	ffice
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DEC 1 3 2004

1301 W. Grand Avenue, Artesia, NM 88210 District III Oil Conservation Division 1000 Rio Brazos Rd., Aztec, NM 87410 1220 South St. Francis Dr. District IV Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505 AMENDED REPORT REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT Ι. 1 Operator name and Address OGRID Number 19797 Yale E. Key, Inc. dba Key Energy Services, Inc. Reason for Filing Code/ Effective Date Sale Skim Oil-11/23/04 168 BBLS... ⁴ API Number ⁵ Pool Name ⁶ Pool Code 30 - 025-10500 **SWD San Andres** 96121 **Property Code** 8 Property Name 9 Well Number 28410 Christmas SWD-606 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 28 22S 37E 330 ft. North 2310 Lea East 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 12 Lse Code 13 Producing Method 14 Gas Connection 15 C-129 Permit Number ¹⁶ C-129 Effective Date ¹⁷ C-129 Expiration Date Code Date III. Oil and Gas Transporters ¹⁹ Transporter Name ²⁰ POD 21 O/G ¹⁸ Transporter 22 POD ULSTR Location **OGRID** and Address and Description DOT Oil Enterprises, LTD. 215019 2816488 P.O. Box 745 Abilene, TX 79608 IV. Produced Water ²³ POD 24 POD ULSTR Location and Description V. Well Completion Data ²⁷ TD 25 Spud Date 26 Ready Date ²⁸ PBTD ²⁹ Perforations 30 DHC, MC 31 Hole Size 32 Casing & Tubing Size 33 Depth Set 34 Sacks Cement VI. Well Test Data ³⁶ Gas Delivery Date 35 Date New Oil 38 Test Length 37 Test Date 39 Tbg. Pressure 40 Csg. Pressure ⁴² Oil 41 Choke Size 43 Water 44 Gas 45 AOF 46 Test Method ⁴⁷ I hereby certify that the rules of the Oil Conservation Division have OIL CONSERVATION DIVISION been complied with and that the information given above is true and complete to the best of my knowledge and belief. Hay W. Win Approved by: Signature Printed name: Approval Date: Approval Date: Teresa Boone Title: Clerk Date: Phone: