District I PO Box 1980, Hobbs, NM 88241-1960

State Of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

District II 811 South 1st, Artesia NM 88210

1000 Rio Bravos Rd. Aztec, NM 87410 District IV 2040 South Pacheco, Santa Fe NM 87505

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

AMENDED REPORT

	REQU	IEST F	OR A	LLOWA	BLE AND A	AUTHO	RIZATI	ON TO	O TRANSPO		
ORBIT ENTERPRISES, INC c/o OIL REPORTS & GAS SERVICES, INC.									2. OGRID Number		
P. O. BOX 755											
HOBBS, NEW MEXICO 88241									3. Reason for Filing Code BACK ON PRODUCTION		
4. API Number 5. Pool Name									EFFECTIVE 12/10/97 5. Pool Code		
30-041-1045		CHAVEROO; SAN ANDRES							12049		
7. Property 00853	8. Property Name FARRELL FEDERAL						9. Well Number #011				
·	urface L	ocation	·	IANIC	LL FLUERA	<u>, r</u>	······································		#	J11	
Ut or lot no. Section 28	Township 07S	Range Lot. Idn. Feet from the 1980			North/South Line Feet from the North 660			East/West Line	County		
	ottom H	L	ation	1960	Nor	tn	660		East	Roosevelt	
Ut or lot no. Section	Township	Range	Lot. Idn.	Feet from		South Line	Feet from	the	East/West Line	County	
-GH 28	078	33E	14. Gas Connection D	1980	Non	th	660		East	Roosevelt	
I	/ab			_	D. C. D. Pinne. Penner		16. C-129 Miletire De	•	17. C-12	9 Replacation Date	
	nd Gas										
18 Transporter OGRID	19 Transporter Name and Address				20 POD 21 O/G			22 POD ULSTR Location and Description			
		LOCK PERMIAN L.L.C. BOX 4848				0706110 0					
		BTON, TX 77210-4648				0706110			J-28-07S-33E		
		,,,,								· · · · · · · · · · · · · · · · · · ·	
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									·		
n/ Desduged	18/5450					• •					
IV. Produced	vvater			24	POD ULSTR Location	and Description					
							<i>a</i> n				
V. Well Com	·										
25 Spud De	te	2	26 Ready Dat	te-	27 TD		28 PBT	D	29 Perforations	30 DHC, DCMC	
31 Hole Siz	31 Hole Size		32 Casing & Tubing 5		ibing Size	33 Depth Set		et		24 Sacks Cement	
		1	-			···					
											
					*						
VI. Well Test	Data										
35 Date New		3	6 Gas Delive	ry Date	37 Test Date	,	38 Test Len	pth	39 Tbg. Pressure	40 Csg. Pressure	
					12/10/97	24 hr				To Osg. Flessure	
41 Choke Size		⁴² OII 20			43 Water 5		44 Gas		45 AOF	46 Test Method	
I hereby certify that the			Division have				0			Swabbing	
with and that the information knowledge and belief. Signature:	,	ve is true and	_	the best my		Approved by	y: ORIG	NAL SK	ERVATION DIVISION GNED BY OHR SIGT I SUPERV	IS WI LLIAMS ISOR	
Printed Name:	U J					Title:					
Title:	HEARD	<u> </u>				Approval Da	te:				
AGEN'	T			Phone:			UL	22	1996		
07/15/9	(505) 393-27			3-2727				*			
47 If this is a change of o	perator fill in th	e OGRID nur	mber and nar	me of the previo	us operator			-			
Previous Ope	erator Signature)	<u> </u>		Printed Name	•		TR	le	Date	