## District I

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719 District III

1000 Rio B

## OIL CONSERVATION DIVISION P.O. Box 2088

Erergy, Minerals & Natural Resources Department

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

Submit to Appropriate District Office

1000 Kio Brazos Kd., Az	lec, NM 87410	5 Copie
District IV	Santa Fe, NM 87504-2	
PO Box 2088, Santa Fe, l	NM 87504-2088	AMENDED REPORT
<u>I.</u>	REQUEST FOR ALLOWABLE AND AU	THORIZATION TO TRANSPORT
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1 Operator name and Address ARROW EXPLORATION COMPANY 1005 CONGRESS STE 880 AUSTIN TX 78701								<sup>2</sup> OGRID Number  144  3 Reason for Filing Code  CHANGE OF OPERATOR					
	PI Number		١			5 Pool Na	ame					ool Code	
30-02		63	A.s.	1742	0	Rone	~~~	W. C	a Tool	1 Freta 00960			
Property Code					8 Property l	410	14 -	9 Well No					
16.19 STAT					e Hg					# 3			
		Location	n					-					
UL or lot no.	Section 26	Township	Range	Lot. Idn	F	eet from the					st/West line	County	
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UL or lot no.	Section	Township	Range	Lot. Idn		eet from the		outh Line	Feet from the	Eas	st/West line	County	
12 Lse Code		g Method Co		Connection	Date	<sup>15</sup> C-129 Per	mit Numb	er 10	<sup>6</sup> C-129 Effective	Date	<sup>17</sup> C-12	9 Expiration Dat	
III. Oil and	Gas Tr											· · · · · · · · · · · · · · · · · · ·	
18 Transporter OGRID		Aı	nsporter Nam nd Address			20 POD 21 O/G			POD ULSTR Location and Description				
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IV. Produce	<u>viate</u>	Î	· · ·			<sup>24</sup> POD ULST	'R Locatio	n and Desc	ription	_			
136655	(E)								•				
V. Well Co	mpletio	n Data		<del></del>		······································					<del></del> -		
<sup>25</sup> Spud Dat	te	<sup>26</sup> j	Ready Date			<sup>27</sup> TD		28	<sup>28</sup> PBTD		<sup>29</sup> Perforations		
<sup>30</sup> Hole	Sie		31 Casing & Tubing Size			32 Depth Set				Щ.	<sup>33</sup> Sacks Cement		
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				·									
I. Well Te	st Data		·					<del></del> -	<u></u>				
34 Date New Oil			Date 36 Test Date		Date	37 Test Length			38 Tbg. Pressure		<sup>39</sup> Csg. Pressure		
<sup>40</sup> Choke Size	Choke Size 41 Oil		<sup>42</sup> Water		ter	<sup>43</sup> Gas			<sup>44</sup> AOF		45 Test Method		
I hereby certify to emplied with and the best of my know Signature:	<del>ngt the</del> inform	nation given	above is true	ivision have and comple rraw Elp Comple	ete to	Apployed by	:		ERVATION D				
Printed name:  Printes H. EOSEL  Title:					Title: DISTRICT ! SUPERVISOR								
President					Approval Date: APR 2 8 1995								
Dato: 3-8-0	95	Phone: 512-479-8380					rk Z O	1220					
If this is a change	e of operato	r fill in the O	GRID numbe	r and name	of the p	revious operator		61100	5 050		DI /ANG		
	Previou	s Operator Si	gnature		······	Printed		6489	) HEG. (	COM	PLIANCE	3/1/95	