State of New Mexico Energy, Minerals & Natural Resources Department

Revised February 10, 1994 Instructions on back Submit to Appropriate District Office

District I PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV

PO Box 2088, Santa Fe, NM 87504-2088

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, NM 87504-2088

X AMENDED REPORT

Form C-104

5 Copies

I.		REQUE	ST FOR A	ALLOWA	ABLI	E AND AU	J THOR	UZ <u>A</u> T	TION TO TH				
		10	perator name ar	nd Address			2				OGRID Number		
Santa Fe E						020305							
550 W. Tex	i0					³ Reason for Filing Code							
Midland, T	API Numb	701 er				5 Pool Name				Effec		3/1/96)	
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	25 - 312				<u>Corbi</u>		Nolfcamp, South Property Name				13320 9 Well Number		
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11	Botto	m Hole L							1	1 -	100		
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¹² Lse Code	13 Produ	ucing Method	Code 14 Gas t	Connection D	ate	15 C-129 Pern	nit Number	10	⁶ C-129 Effective	Date	¹⁷ C-1	29 Expiration Date	
F Oil on	1 Con	<u>P</u>	<u> </u>		L						<u></u>		
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IV. Produc	ced Wa	ater											
			_			²⁴ POD ULST	'R Location	and Des	cription				
22457			Sec. 5,	T-18S, F	R-33E	<u>. </u>							
V. Well Completion Data 25 Spud Date 26 Spud Date			l ²⁶ Ready Date	Boody Date			²⁷ TD 28				20 p		
Spud Date		Ready D.				** 1D			²⁸ PBTD		29 Per	rforations	
30 H	ole Sie	31 Ca		ing & Tubing Size		32 <u>D</u>		Depth Set		33 Sacks Cement			
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VI. Well T 34 Date New (35 Gas Deliv	very Date	36 Test I	Date	37 Test Length			38 Tbg. Pressure	. T	39 C	Ssg. Pressure	
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⁴⁰ Choke Size		⁴¹ Oil		42 Wate	e r	43 Gas		44 AOF		45 Test Method		2.6.4	
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46 I hereby certify	v that the	rules of the Oi	Conservation	Division have	- heen	<u> </u>							
complied with and	d that the i	information giv	ven above is tru	ie and comple	te to		OI	IL CON	NSERVATION	I DIVI	SION		
Signature:	1 / Y		Approved by		15.3 B. F.	SPORTERY IT	rany si	≅∀TAN					
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Sr. Produc			Approval Date:										
Date: 4/11/9			Phone: Q1	Phone: 915/687-3551			Park Lo All					35	
47 If this is a cha		perator fill in th											
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Previous Operator Signature						Printe	d Name			Title Date			