

DISTRICT I
P.O. Box 1980, Hobbs, NM 88241-1980
DISTRICT II
P.O. Box Drawer DD, Artesia, NM 88211-0719
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410
DISTRICT IV
P.O. Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised February 10, 199
Instructions on back
Submit to Appropriate District Office
5 Copie
AMENDED REPORT

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address TEXACO EXPLORATION & PRODUCTION INC. 205 E. Bender, HOBBS, NM 88240		² OGRID Number 022351	
⁴ API Number 30-025-35039		⁵ Pool Name LOVINGTON DRINKARD	
⁷ Property Code 25911		⁸ Property Name CAYLOR '6'	
		³ Reason for Filing Code 11-21-00 RT 500 BBLs	
		⁶ Pool Code 40490	
		⁹ Well No. 1	

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
K	6	17-S	37-E		2310	SOUTH	1650	WEST	LEA

III 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 P	¹³ Producing Method Code P	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
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III Oil and Gas Transporters

¹⁸ Transporter OGRID 022507	¹⁹ Transporter Name and Address EQUILON ENTERPRISES LLC	²⁰ POD 2827123	²¹ O/G O	²² POD ULSTR Location and Description K-6-17S-37E LEA COUNTY, NM

IV Produced Water

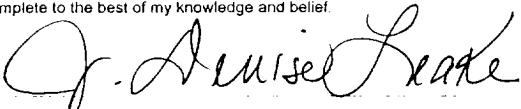
²³ POD	²⁴ POD ULSTR Location and Description
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V Well Completion Data

²⁵ Spud Date 9-25-2000	²⁶ Ready Date	²⁷ Total Depth	²⁸ PBTD	²⁹ Perforations
³⁰ HOLE SIZE	³¹ CASING & TUBING SIZE	³² DEPTH SET	³³ SACKS CEMENT	

VI Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Date of Test	³⁷ Length of Test	³⁸ Tubing Pressure	³⁹ Casing Pressure
⁴⁰ Choke Size	⁴¹ Oil - Bbls.	⁴² Water - Bbls.	⁴³ Gas - MCF	⁴⁴ AOF	⁴⁵ Test Method

⁴⁶ I hereby certify that the rules and regulations 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  Printed Name J. Denise Leake Title Engineering Assistant Date 11/21/00 Telephone 397-0405	OIL CONSERVATION DIVISION Approved By: _____ Title: _____ Approval Date: _____
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⁴⁷ 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
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