District I

District II

District III

PO Box 1980, Hobbs, NM 88241-1980

PO Drawer DD, Artesia, NM 88211-0719

State of New Mexico inergy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

Instructions on back

OIL CONSERVATION DIVISION

PO Box 2088

Submit to Appropriate District Office

5 Copies

1000 Rio Braz	os Rd., Az	tec, NM	87410		Santa Fe,	NM 875	504-208	38				1		
District IV PO Box 2088,	Santa Fe.	NM 8756	14_2088									AMENDED RE	:PORT	
I.	-			LOWAF	BLE AND	AUTHO	RIZAT	וסדי	N TO T	RAN	SPOR'	\mathbf{T}		
			erator Name an			AUTHORIZATION TO TRANSPORT OGRID Number								
		-	rporatio		ada)						5137			
	l. Broa		Reason for Filing Code											
	homa (City,	OK 731	102-8260			-1-96							
	Number 025-017	735		Toas		Pool Name						Pool Code		
	erty Code	733		1603		rings Property Nan	· ·				589	Well Number		
0034				Maha	Federal				ĺ	1	Well Number			
II "Sui	rface L	ocatio	n	-										
UI or lot no.		Township		Lot.Idn	Feet from the	North/Sou	th Line	Feet	from the	East/W	Vest Line	County		
C	14	20S	33E		660	North	h	1	980	Wes	st	Lea		
		,	cation	- ,										
UI or lot no.		Township		Lot.Idn	Feet from the	North/Sour	th Line	Feet	Feet from the		Vest Line	County		
12 Lse Code	" Lse Code " Producing Metho		d Code	Code "Gas Conne		ection Date "C-129 Perm		t Number C-129 I		Effective Date		C-129 Expiration I	Date	
		s Trai	sporters	· · · · · · · · · · · · · · · · · · ·					<u> </u>					
Trans	Transporter OGRID			"Transporter Name and Address			POD ²¹ O/O			POD ULSTR Location and Description				
007440			EOTT				353910 0			С				
			P.O. B Housto	Box 4666 on, TX	666		1			Lea Co., NM				
				as Corpo	0 8				С	14-20	OS-33E	·		
			0dessa	Penbrook , TX						a Co.,				
										Í				
IV. Prod		<u>Vater</u>												
	" POD			* POD ULSTR Location and Description										
V. Well (Comple	etion I												
³⁸ Spud Date			38 I	Ready Date	" TD			" PBTD		$\overline{}$	Perforations			
ж.	Hole Size			11 Casing & T	Fubing Size		32	² Depth	ı Set		33 (Sacks Cement		
														
1														
										-+				
VI. Well														
* Date N	New Oil	"	Gas Delivery I	Date	* Test Date	, "	" Test Length " Tbg.				езяцге	³¹ Csg. Pressu	ure	
4 Choke Size			" Oil	41 Oil 41 Water			43 Gas			" A	OF	" Test Metho	od	
					ve been complied									
vith and that the		n given at	ove is true and	complete to	the best of my	-	OI	T CC	ONSERY	VATIC	VIQ.NC	ISION.		
tnowledge and b Signature:	elief.	h	-18								COMPTICATION REVISOR			
rinted Name:	Approved b	y:												
Title:		ris Ba arketi	ing Repre	ive	Title: Approval D	late:				C . hjer				
Date:					235–3611	Inpprove.	alc.		J,	in L	<u> </u>	<u> </u>		
If this is a ch	ange of op	erator fill	in the OGRID	number and r	name of the previo	ous operator			7-11					
	Previous O	perator Si	gnature			Printed Name				Ti	itle	Date	_	
											inc	Date		