State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

PO Box 1980, Hobbs, NM 88241-1980 District II 311 S. 1st Street, Artesia, NM 88210-2834 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV

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

■ AMENDED REPORT

| PO Box 2088, Santi | PO Box 2088, Santa Fe, NM 87504-2088 | | | | | | | | | | |
|--|--------------------------------------|-------------------|---------------------------------------|-------------------------|---------------------|-------------------------|-------------------|-----------------------------------|-----------------------|---|--|
| I. | F | REQUEST | [FOR A | ALL <u>OWA</u> J | BLE AND | AUTHO |)RIZAT | TION TO TR | | | |
| | | ¹ Oper | rator name ar | nd Address | | | | 2 (| OGRID Number | r | |
| Amerada Hes | | ration | | | | | | | 000495 | | |
| P.O. Box 84 | | | | | | | | | eason for Filing (| Code | |
| Seminole, To | Texas 793 API Number | | | | 5 Poo | l Name | | 1-23-97 | /, Chg. Met | cer & POD Nos | |
| | | | | | | | | | | Pool Code | |
| | 025 - 05892 | | | | Eunice Mon | | /SA | | | 23000 | |
| | operty Code | | | ·· | 8 Propert | • | 7. 0 | | 9 1 | Well Number | |
| | 000135 | | | Nortn | Monument G | /SA Unit | B1k. 22 | 2 | | 10 | |
| II. | | e Location | | * = . • • . | T = C - the | 1 22 -67 | | | | | |
| UL or lot no. | Section | Township | Range | Lot. Idn | Feet from the | | South Line | Feet from the | East/West line | , | |
| J 11 | Pottorn | 20\$ | 37E | | 1980 | 50 | outh | 1980 | East | Lea | |
| | Bottom | Hole Loc | | | <u> </u> | 7 -1/ | | | | | |
| UL or lot no. | Section | Township | Range Lot. Idn | | Feet from the | North/S | South Line | Feet from the | East/West line | e County | |
| 12 Lse Code | 13 Produci | ing Method Cod | de 14 Gas | Connection Date | e 15 C-129 | Permit Numb | ber 1 | C-129 Effective 1 | Date 17 (| C-129 Expiration Date | |
| Р | | | | | | | | * | | · • • • • • • • • • • • • • • • • • • • | |
| III. Oil and | d Gas T | ransporte | rs | | | | | | | | |
| 18 Transporter OGRID | | 19 Trans | nsporter Nam | ne | 20 PC | OD . | 21 O/G | | D ULSTR Locat | | |
| 0 | | ren Petrole | · · · · · · · · · · · · · · · · · · · | ID | - | | | <u> </u> | and Description | | |
| 024548 | | | | oany, LP Suite 1200 | 21 | 1230 | G | Unit D. Sec Warren Mete | | | |
| | 3508002000004 | iston. Texa: | - | Juice Les | | | | Wallennoo | ir No. ooco | 118. | |
| | 2000 | | | | | | | | | | |
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| IV. Produc | ed Wat | er | | | 24 DOD II | | | | | | |
| - rob | | | | | ²⁴ POD O | LSTR Location | ion and Desi | cription | | | |
| | - ,• | | | | | | | | | | |
| V. Well Co | ompletic | on Data | . 5749 | | 77 770 | | | | 20 : | | |
| ²⁵ Spud Da | ate | | Ready Date | | ²⁷ TD | | 6. | ²⁸ PBTD | 29 1 | Perforations | |
| 30 Hc | ole Sie | <u> </u> | 31 Casin | ıg & Tubing Size | | <u> </u> | Depth Set | | ³³ Sacks (| | |
| | | | | ¿ ox ruome | | | epin sei | | - Sacks | Cement | |
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| • | | | | | | | | | | | |
| | est Data | | | | | | | | | | |
| 34 Date New O | | 35 Gas Delivery | Date | ³⁶ Test Date | e 37 | ⁷ Test Lengt | th | 38 Tbg. Pressure | 39 | Csg. Pressure | |
| | | | | | | | | | | | |
| ⁴⁰ Choke Size | | ⁴¹ Oil | | 42 Water | | 43 Gas | | ⁴⁴ AOF | 45 | Test Method | |
| | | | | | | | | | | | |
| 46 I hereby certify | that the rul | es of the Oil Cc | onservation ! | Division have be | een | | | TOTAL LATION | | | |
| complied with and the best of my know | that the info | ormation given a | above is true | e and complete to | to | | | NSERVATION | | | |
| Signature: | 011/1/1 | 11.4 | | | Approve | d by: □K | | SKINGO EY JER Marie e regetina | | ! | |
| Printed name: | - La year | and a | | | Title: | | <u>##1,22 g</u> . | imor i sogera | <u> </u> | | |
| R. L. Wheeler | <u>r, Jr.</u> | | | | | ***** | - | | | | |
| Admin. Svc. (| Coord. | | | | Approva | I Date: | f | EB 24 17 | 37 | | |
| Date: | 1-30-97 | , 1 | Phone: 9 | 915 758-6700 | n | | | | | | |
| ⁴⁷ If this is a char | | | | | | -1 | | | | | |
| ## Will a | nge or op | itot im m | GKID III | er and name of . | the previous op- | rator | | | | | |
| | Previ | ious Operator Si | ignature | | P7 | rinted Name | | | Title | Date | |