## State of New Mexico Lrgy, Minerals & Natural Resources Department

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

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

Santa Fe, NM 87504-2088 ■ AMENDED REPORT

I.	R	.EQUES	T FOR A	LLOW	ABLF	E AND AU	UTHO	)R <u>IZA</u> T	ION TO			
		<sup>1</sup> Ope	erator name an	nd Address					$\overline{}$		RID Number	
Santa Fe E									X1. ,7		02030)	
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UL or lot no.	Section	Township		Lot. Idn	Fee	et from the	North/S	South Line	Feet from the	he E	East/West lin	ne County
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12 Lse Code F	13 Producin	ng Method Co F		Connection I		<sup>15</sup> C-129 Perr	nit Numbe	er	<sup>6</sup> C-129 Effe	ctive Date	e ''' (	C-129 Expiration Date
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IV. Produc	D	<u>3r</u>			<del></del> ;	<sup>24</sup> POD ULST	rR Locati	ion and Des	eription			
2717	725								/**r			
V. Well C	ompletio	n <u>Data</u>										
<sup>25</sup> Spud D	Date	26	Ready Date			<sup>27</sup> TD		28	<sup>28</sup> PBTD			Perforations
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VI. Well T	est Data	<u>_</u>										
34 Date New (		35 Gas Deliver	ry Date	<sup>36</sup> Test I	Date	37 T	Test Length	ih	38 Tbg. Pro	essure	30)	Csg. Pressure
												<u></u>
<sup>40</sup> Choke Size	2	<sup>41</sup> Oil		<sup>42</sup> Wat	ter	43	43 Gas		<sup>44</sup> AOF	ē	45	<sup>5</sup> Test Method
44 - 1 - be cortif		2-5- Oil :	<u> </u>	- · · · - har		1						
46 I hereby certificomplied with and	d that the info	ormation give	n above is tru	Division nav- ie and compl	e been lete to	4	(	OIL CON	NSERVAT	'ION D	IVISION	1
the best of my known Signature:	Owledge and a	pelier.	0,00	Janal	/ 1	Approved b	·y:					·:
Printed name:	- John	37.11.	4	buy.	1	Title:			<del></del>			
Terry McCu		-				Approval D	Nate:					
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Date: August	<u> </u>	<del> </del>		5/687-3						· ——		
<sup>47</sup> If this is a cha	ange of operat	tor fill in the	OGRID numb	ser and name	e of the pr	revious operat	or	_	_			
	Previo	ious Operator	Signature			Print	ed Name				Title	Date
L												