

District I
PO Box 1900, Hobbs, NM 88241-1900
District II
PO Drawer DD, Artesia, NM 88211-9719
District III
1000 Rio Brava Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-104
Revised February 10, 1994

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Instructions on back
Submit to Appropriate District Office
5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address Burgundy Oil & Gas of New Mexico, Inc. 401 West Texas, Suite 1003 Midland, TX 79701		OGRID Number 003044
		Reason for Filing Code CH
AIT Number 30 - 0 25-07802	Pool Name Skaggs Grayburg	Pool Code 57380
Property Code 004800 15824	Property Name Skaggs Grayburg Unit	Well Number 16

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West Line	County
C	18	20S	38E		990	North	1667.2	West	Lea

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West Line	County
Le Code P	Producing Method Code P	Gas Connection Date N/A	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
020667	Shell Pipeline Corporation P.O. Box 1910 Midland, TX 79702	1039010	0	J 12 20S 37E Central Battery
024650	Warren Petroleum Corporation P.O. Box 1589 Tulsa, OK 74102	1039030	G	J 12 20S 37E

IV. Produced Water

POD 1039050	POD ULSTR Location and Description J 12 20S 37E
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V. Well Completion Data

Spud Date	Ready Date	TD	FBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Cap. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules 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: *Ben Taylor*
Printed name: *Ben Taylor*
Title: *Prop. Manager*
Date: *10/10/94*
Phone: *915/684-4033*

OIL CONSERVATION DIVISION
Approved by:
Title:
Approval Date: *09-30-94*

If this is a change of operator fill in the OGRID number and name of the previous operator
Lori A. Hodge
Lori A. Hodge, Landman
Greenhill Petroleum Corporation (OGRID No. 009374) 11490 Westheimer, Suite 200 Houston, TX 77077
09-30-94

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED
-AMENDED REPORT- AT THE TOP OF THIS DOCUMENT

22. The ULSR location of the POD if it is different from the well completion location and a short description of the POD [Example: "Battery A", "Jones CPD", etc.]
23. The POD number of the storage from which water is moved from the POD if it is different from the POD number and write it here. [Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.]
24. Well completion location and a short description of the POD if it is different from the ULSR location of the POD if it is different from the well completion location and a short description of the POD [Example: "Battery A Water Tank", "Jones CPD Water Tank", etc.]
25. MODOA/RN drilling commenced
26. MODOA/RN the completion was ready to produce
27. Total vertical depth of the well
28. Plugback vertical depth
29. Top and bottom perforation in the completion or casing shoe and TD if openhole
30. Inside diameter of the well bore
31. Outside diameter of the casing and tubing
32. Depth of casing and tubing. If a casing liner show top and bottom.
33. Number of sacks of cement used per casing string
34. The following test data for an oil well it must be from a test conducted only after the total volume of load oil is recovered.
35. MODOA/RN that new oil was first produced
36. MODOA/RN that gas was first produced into a pipeline
37. MODOA/RN that the following test was completed
38. Length in hours of the test
39. Flowing tubing pressure - oil wells
40. Shut-in tubing pressure - oil wells
41. Flowing casing pressure - oil wells
42. Shut-in casing pressure - gas wells
43. Diameter of the choke used in the test
44. Barrels of oil produced during the test
45. Barrels of water produced during the test
46. MCF of gas produced during the test
47. Gas well calculated absolute open flow in MCF/D
48. The method used to test the well:
F Flowing
P Pumping
S Swabbing
G Other method please write it in.
49. The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about the report
50. The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person
51. The gas or oil transporter's OGRID number
52. Name and address of the transporter of the product
53. The number assigned to the POD from which the product will be transported by the transporter. If this is a new well or recompletion and the POD has no number the district office will assign a number and write it here.
54. Product code from the following table:
O Oil
G Gas
55. MODOA/RN of the expiration of C-129 approval for this completion
56. MODOA/RN of the C-129 approval for this completion
57. The permit number from the District approved C-129 for this completion
58. MODOA/RN that the completion was first connected to a gas transporter
59. The producing method code from the following table:
F Flowing
P Pumping or other artificial lift
60. MODOA/RN that the completion was first connected to a gas transporter
61. Lease code from the following table:
F Federal
S State
J Jicarilla
N Navajo
U Ute Mountain Ute
I Other Indian Tribe
62. The bottom hole location of this completion
NOTE: If the location use that number in the "UL or lot no." box. Otherwise use the OCD unit letter.
63. The surface location of this completion. NOTE: If the United States government survey designates a Lot Number for this location use that number in the "UL or lot no." box.
64. The well number for this completion
65. The property name (well name) for this completion
66. The property code for this completion
67. The pool code for this pool
68. The name of the pool for this completion
69. The API number of this well
70. Reason for filling code from the following table:
NW New Well
RC Recompletion
AO Change of Operator
CO Add oil/condensate transporter
CG Change oil/condensate transporter
AG Add gas transporter
RT Request for test allowable (include volume requested)
71. If for any other reason write that reason in this box.
72. Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
73. Operator's name and address
74. Improperly filled out or incomplete forms may be returned to operators unapproved.
75. A separate C-104 must be filled for each pool in a multiple completion.
76. Fill out only sections I, II, III, IV, and the operator certifications for other such changes.
77. All sections of this form must be filled out for allowable requests on new and recompleted wells.
78. A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.
79. Report all oil volumes to the nearest whole barrel.
80. Report all gas volumes at 15.025 PSIA at 60°.