

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator name and Address <b>Conoco Inc. 10 Desta Dr. Ste 100W Midland, Tx. 79705-4500</b>		2 OGRID Number <b>005073</b>
		3 Reason for Filling Code CG (Effective 7-1-98)
4 API Number <b>30 - 0 25-32492</b>	5 Pool Name <b>Warren Drinkard</b>	6. Pool Code <b>63080</b>
7. Property Code <b>003122</b>	8 Property Name <b>Warren Unit</b>	9 Well Number <b>115</b>

II. <sup>10</sup> Surface Location

UL or lot. no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
<b>E</b>	<b>28</b>	<b>20S</b>	<b>38E</b>		<b>2105</b>	<b>North</b>	<b>660</b>	<b>West</b>	<b>Lea</b>

11 Bottom Hole Location

UL or Lot	Section	Township	Range	Lot. Idn.	Feet from the	North/South Line	Feet from the	East/West Line	county
12 Lse Code	13. Producing Method Code	14. Gas Connection Date	15. C-129 Permit Number	16. C-129 Effective Date	17. C-12b Expiration Date				
<b>F</b>	<b>P</b>								

III. Oil and Gas Transporters

18 Transporter OGRID	19. Transporter Name and Address	20 POD	21. O/G	22. POD ULSTR Location and Description
<b>026450</b>	<b>Dynegry Midstream Services 6 Desta Drive, Suite 3300 Midland, Tx. 79705</b>	<b>2813902</b>	<b>G</b>	<b>F 28 20S 38E</b>

IV. Produced Water

23 POD	24. POD ULSTR Location and Description

V. Well Completion Data

25 Spud Date	26 Rea dy Date	27. TD	28 PBTd	29 Perforations	DHC,DC,MC
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. Test Date	37. Test Length	38. Tbg. Pressure	39. Csg. Pressure
40. Choke Siz e	41. Oil	42. Water	43. Gas	44. AOF	45. 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: *Bill R. Keathly*

Printed name: **Bill R. Keathly**

Title **Sr. Regulatory Specialist**

Date **9-11-98**

Phone **(915) 686-5424**

OIL CONSERVATION DIVISION

Approved by **ORIGINAL SIGNED BY CHRIS WILLIAMS**  
DISTRICT I SUPERVISOR

Approval Date:

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