				RMIT 1 PAULS 508 W.	Energy, Min VIL CON Santa CO DRI Operator Na ON OIL (	VSERVAT PO Box Fe, NM LL, RE-EN Me and Address. COMPANY, SUITE 100 79701	AI RESOURCES Department FION DIVISION 2088 87504-2088 ENTER, DEEPEN, PLUC			Form C-101 Revised February 10, 1994 Instructions on back omit to Appropriate District Office State Lease - 6 Copies Fee Lease - 5 Copies AMENDED REPORT AMENDED REPORT BACK, OR ADD A ZONE <sup>2</sup> OGRID Number 159123 <sup>3</sup> API Number 30 - 0.25 - 341144			
* Property Code				* Property Name STATE 33								' Well No.	
$\frac{2}{1}$													
UL or lot no.	Section	Town	gide	Range	Lot Ida	Feet from the	North/South	line	Fee: from the	East/V	Vest line	County	
F	33	21-	s	35-E		1980		₹ТН	2310		WEST	LEA	
<sup>8</sup> Proposed Bottom Hole Location If Different From Surface													
UL or lot no.	Section	Town		Range	Lot Idn	Feet from the	North/South	_	Feet. from the	East/West line		County	
<u></u>	· P	ropoer	ed Pool 1			" Proposed Pool 2							
	AMA F	RIDG	SE - Mol	row E	ast	N/A							
"Work Type Code "Well Type Code "Code							ble/Rotary "Lasse Type Code "Ground Level Elevation					d Level Elevation	
N				G R					S			3621'	
" Multiple NO				<sup>7</sup> Proposed 1 3,000	Depth	" For MORROV	mation V T		" Contractor	" Contractor TNIBR/SHARP		<sup>20</sup> Spud Date N/A	
<u>_</u>					Propose								
Hole Size Casin				21 Proposed Casing ng Size Casing weight/foot			Setting Depth			Sacks of Cement		Estimated TOC	
17 1/2"	17 1/2"		13 3/8"		5	64,5	1000'		10	1000		SURF	
			9 5/8"		36 & 40		5600'		1500		SURF		
8 3/4*			<u></u>			23		11,000'		800		5400'	
6 1/8"	6 1/8" 4		1/2"		1	11.6		13,000'		400		10,600'	
<sup>201</sup> Describe Pro Plar aba	be blowout pose to c to test : ndonme	frill a signifi nt will	Mon Cant be p	row well shows a performe	to 13,00 and evalued in according to the second sec	ditional sheets if 0'. Cement uate with ad- ordance with	will be circula equate loggir prudent pra will be from t	ated ng pr ctice 9 5/8 erm	to surface on ogram. Com s and regulat " casing to to it Expires 1 ate Unless	13 3/8 pletior ory rec tal dep Yeal	3" & 9 5/4 1 or quiremen oth. 7 From 7	8" casing its. Approvate	
<sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief.							OIL CONSERVATION DIVISION						
of my knowledge and belief. Signature:													
Printed name:			. <u> </u>			Approved BRIGINAL CICCLED BY OF RIS WILLIAMS Title: DISTRICT I SUPERVISOR							
							pproval Dite:	\$ 5	157 p	zpiration	Date:		
Date: 9-17-97				Phone: 915-987-0323			Conditions of Approval : Attached						

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