District I

PO Box 1980, Hobbs, NM 88241-1980

District II

811 South First, Artesia, NM 88210

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco

	1 OTHI C-104
	Revised October 18, 1994
	Instructions on back
Submit to	Appropriate District Office
	5 Copies

								— AN	ENDED REPO	
	ta Fe, NM 87505 REQUEST	FOR AL	LOWABLE	AND AUT	HORIZAT	ו מת נומו	D א אנפי	ייםי	CHOLD KEF	
	·	Operator nan	ne and Address		-CIULAI		100	PORT		
RAPTOR RESOUR P.O. BOX 160430	CES, INC.					<u> </u>	102791			
USTIN. TX 78716						CH Reason for Filing Code				
30-0 25	57221	Curalit	: mathx 7	Pool Name	wen G	an hu	71	~~	Pool Code	
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	Hole Loca									
UL or lot no. Section	Township	Range	1 1	from the	orth/South line	Feet from the	East/V	Vest line	LEA County	
12 Lee Code 12 Prosh	scing Method Code			¹³ C-129 Permit N	umber '	146139 Effectiv	e Date	"C	129 Expiration Dat	
. Oil and Gas	100	TC.				3/1/99			123 Expiration Dai	
18 Transporter	19 T	ransporter Na	me	* POD	²¹ O/G		# 200			
OGRID LUIX 3		and Address		DCX16-14-1	1 0		and i	LSTR Lo Descriptio	cation n	
)*(O) <i>)</i> PL	AINS MARKE	TING, L. P.		28/014	- 0					
1				A Section of the sect						
	RICHARDSO	NC		281589	6 G					
GF	SOLINE CO.									
										
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²³ POD				[™] POD ULSTR	Location and De			·		
						acription.				
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¹¹ Spud Date	* Rea	dy Date	" TD		PBTD	²⁰ Perfor	²⁰ Perforations ²⁰ DHC, DC, M		DHC, DC,MC	
11 Hole Size		³² Casi	ng & Tubing Size	²³ Depth Set				<u> </u>		
								Sacks	Cement	
Well Test De										
Well Test Da Bate New Oil	M Gas Delive	TV Date	77 Test Date			·				
				* Te	it Length	" Tbg. P	ressure	4	Cag. Pressure	
	a Oïl		4 Water	•	Gas	[™] AC	F	1	Test Method	
41 Choke Size										
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hereby certify that the ru and that the information wledge and belief. ature:	USSELL DOUG	ASS	to the best of my	Approved by:	- 444					
hereby certify that the number of the number	USSELL DOUG	e and complete	512) 478-4427	Approved by: Title: Approval Date:	- 444					
and that the information whedge and belief. ature: Red name: PF	USSELL DOUG	Chone:	512) 478-4427 and name of the prev	Approved by: Title: Approval Date:	- 444					
hereby certify that the rule and that the information whedge and belief. ature: ted name: PF this is a change of oper	USSELL DOUG	Chone:	512) 478-4427	Approved by: Title: Approval Date:	JUN Tisdale			· WILI	IAME	

THIS IS AN AMENDED REPORT. CHECK THE BOX LABLED MENDED REPORT" AT THE TOP OF THIS DOCUMENT

eport all gas volumes at 15.025 PSIA at 60°, eport all oil volumes to the nearest whole barrel.

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.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for

District I

State of New Mexico

Form C-104

PO Box 1980, Hobbs, NM 88241-1980

Energy, Minerals & Natural Resources Department

District II

PO Drawer DD, Artesia,NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION PO Box 6429 Santa Fe, NM 87505

Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

District IV PO Box, Santa	Fe, NM 8750	04-2088							AMENDED REP		
		REQUES				AUTHORI	ZATION T	O TRANSPOR			
1 Operator name and Address							2 OGRID Number				
Clayton Williams Energy, Inc.								025706 3 Reason for Filing Code			
	ix Desta Drive, Suite 3000 fidland, Texas 79705							3/1/96			
Midiand, I	4 API Numbe		r		5 Pool Name		<u> </u>	CO	6 Pool Code		
30-025-10722 Langlie Mattix 7 Rvrs Quee						GB			37240		
7 Property Code 8 Property Na									9 Weil Number		
	011792		State A	AC 1					90		
II. 10 Surf	ace Locati	on		***							
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	om Hole L										
UI or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West Line	County		
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12 Lse Code	13 Producing		14Gas Conn	ection Date	15 C-129 Permit	Number	16 C-129 Ellecti	ve Date	17 C-129 Expiration Date		
S		P	<u> </u>				<u> </u>				
III. Oil and		SPORTERS 19 Transporter Na	me and Addre	-44	7 20 POD	21 O/G	1	22 POD ULSTR Location	and Description		
OGRID	ļ	is manpoint in						· · · · · · · · · · · · · · · · · · ·			
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	1	t. Fort Worth,		02	2222742		AC 1 Battery				
020445	i	ermian Corpora			2620710	0	1 - 3 - 23S -				
	P. O. Box 4	648 Houston	n, Tx 7721	0-4648		<u> </u>	AC 1 Batte	ı y			
							ŀ				
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IV. Produc	ed Water										
23 P			-		24	POD ULSTR Location	on and Description	-	**************************************		
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V. Well C	ompletion	Data									
25 Spu	d Date	26 Read	y Date	27 TD		28 PBTD		29 Perforations			
					 			-			
	30 Hole Size		31 Casing & Tubing Size			32 Depth Set		33	Sacks Cement		
					 						
								 			
VI. Well T	est Data		<u> </u>		· · · · ·				<u> </u>		
34 Date 1		35 Gas Deli	very Date	30	5 Test Date	37 Te	st Length	38 Tbg Pressure	39 Csg. Pressure		
40 Chol	ce Size	41 C	il 42 Water		43 Gas		44 AOF	45 Test Method			
46 Thereby cost	ifuthat the rule	of the Oil Conser	ration Divisio	on have been o	omplied with and that		OII CONS	SERVATION DIV	JISION		
		ve is true and comp					OIL CONS	ERVATION DI	VISION		
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10	(mm)	1. m	CAHL	ey		Title:	- FIRE	VED 2 ¥ 771, ₹ ₹ € €	NCTX		
Printed name: Robin S. M		•		1		Tiue:		~ ~ ~ ~			
Title:					·	Approval Date:		MAD AM 400	····································		
Production	Analyst					<u> </u>		MAR 07 199	ס		
Date: 03/04/96		Phone: (915) 6				l			· · · · · · · · · · · · · · · · · · ·		
17 If this is a cha	nge of operator	fill in the OGRID	number and n	ame of the pre-	vious operator						
	Dranious O-	ator Signature			·						
Previous Operator Signature					Printed Name		Title	Date			

District I

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

State of New Mexico

Energy, Minerals & Natural Resources Department

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

Form C-104 Revised February 10, 1994

Instructions on back Submit to Appropriate District Office 5 Copies

AMENDED REPORT

O Box, Santa Fe,	NM 87504	REQUEST	FOR A	LLOW	ABLE AND	AUTHORIZ	CATION TO	TRANSPOR	mher		
1 Operator name and Address							2 OGRID Number				
layton Willi							025706 3 Reason for Filing Code				
x Desta Dr								√ cg			
idland, Tex)5			5 Pool Name		<u> </u>		6 Pool Code		
4 API Number								VC	37240		
0-025-10722 Langlie Mattix 7 Rv					8 Property Name	В		9 Well Number			
	Property Code	e			8 Property Name				90		
	011792		State A	AC 1							
10 Surfac			Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West Line	County		
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11 Botton	n Hole Lo	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West Line	County		
	ection	Township	realige.								
/A Lse Code 1:	2 Descripe 1	Method Code	14Gas Conne	ction Date	15 C-129 Permit N	Jumber	16 C-129 Effect	ive Date	17 C-129 Expiration Date		
	2 Floring 1							i			
<u>s</u>		P .	9/	1/95			<u> </u>				
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		dson Gasoline			2620730	G	_				
		t. Fort Worth,					AC 1 Battery I - 3 - 23S - 36E				
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В	3ox 42130	Houston, Te	xas 77242				AC 1 Date	<u>. </u>			
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V. Produced					24	POD ULSTR Locati	on and Description				
2620750		1-3-	23S - 36	E /	AC 1 Battery						
/. Well Co					27 TD	28	PBTD	7	9 Perforations		
25 Spud l	Date	26 Reac	ry Date		27 115						
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m 111 11 T-	-t Doto					<u> </u>					
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40 Choke	- Size	41	Oil		42 Water	4	3 Gas	44 AOF	45 Test Method		
40 CROKE	5 5126		-	ļ		1		i			
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46 I hereby certi	fy that the ru	les of the Oil Cons	ervation Divis	ion have been	n complied with and that		OIL CO	NSERVATION D	IVISION		
	tion given ab			_	wledge and belief.	Approved By:		TOTAL SERV			
Signature:	Tem)) <u>A. 7</u>	nya	rlev	/			\$100 1990 1 955			
rinted name:	<u> </u>		1			Title:					
Robin S. M	cCarley			V		<u> </u>					
Title:				·		Approval Date:		CCT 1	8 1235		
Production	Analyst					 					
Date: 09/26/95			682-6324	name of the	previous operator	<u></u>	*				
7 If this is a char	nge of operate	or fill in the OGRI	D HUMBOCT AMO	marise or rise]	brassom obsessors						
								m:1	Date		
	Previous Op	perator Signature				Printed Name		Title	Date		