Energy, Minerals and Natural Resources Department

Revised February 10, 1994

Instructions on back

DISTRICT II

**OIL CONSERVATION DIVISION** 

Submit to Appropriate District Office

PO Drawer DD, Artesia, NM 88211-0719

PO Box 1980, Hobbs, NM 88241-1980

PO Box 2088 Santa Fe, NM 87504-2088 5 Copies

Form C-104

|  |  | XX | Amended Report |
|--|--|----|----------------|

| 1000 Rio Brazos R  | d., Aztec, Ni  | vi 87410                   | )                       |                                       |                    |                  |             |               |             |  |                 | XX Amended Report     |  |
|--|----------------|----------------------------|-------------------------|---------------------------------------|--------------------|------------------|-------------|---------------|-------------|--|-----------------|-----------------------|--|
| DISTRICT IV  |                |                            |                         |                                       |                    |                  |             |               |             |  |                 | Amended Report        |  |
| PO Box 2088, Sant  |                |                            |                         | RI F AN                               | D AUTHOR           | IZATION TO       | TRANS       | PORT          |             |  |                 |                       |  |
| I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT  Operator Name and Address |                |                            |                         |                                       |                    |                  |             |               |             | OGRID Number                             |                 |                       |  |
| Anadarko Petroleum Corporation   |                |                            |                         |                                       |                    |                  |             |               |             | 000817                                   |                 |                       |  |
|  |                |                            |                         |                                       |                    |                  |             |               |             | Reason for Filling Code EFFECTIVE 7/1/98 |                 |                       |  |
| API No   |                |                            | Pool Name               |                                       |                    |                  |             |               |             |  |                 | Pool Code             |  |
| 30-025   |                |                            | PENROSE SKELLY GRAYBURG |                                       |                    |                  |             |               |             |  |                 | 50350                 |  |
| Propert<br>001   | _              | Property Name E. W. WALDEN |                         |                                       |                    |                  |             |               |             |  |                 | Well Number<br>014    |  |
|  | ce Loca        | tion                       |                         |                                       |                    |                  |             |               |             |  |                 |                       |  |
| UL or lot n  | Section<br>15  | Town:                      | - 1                     | Lot.ldn                               | Feet from the 550  | North/So<br>SOU  | j           |               |             |  |                 | County<br>LEA         |  |
|  | m Hole         |                            |                         | l                                     | 330                |                  |             |               | 123         | VVES                                     | · <b>.</b>      | LEA                   |  |
| UL or lot n  | Section        | 1                          | -                       | Lot.ldn                               | Feet from the      | North/So         |             | Feet from     |             | he East/West Lir                         |                 | County                |  |
| N  | 15             | 22                         |                         |                                       | 550                | SOU              |             | 2             | 125         | WES                                      | T               | LEA                   |  |
| Lse Code   | Producin       | ig Meth<br>P               | od Code                 | Gas Cor                               | nnection Date      | C-129 Per        | mit Number  |               | C-12        | C-129 Effective Date                     |                 | C-129 Expiration Date |  |
| III. Oil a   | nd Gas         | Tran                       | nsporters               | i                                     |                    | <del></del>      |             |               |             |  |                 |                       |  |
| Transporter  |                |                            | •                       | rter Name                             |                    | POD              |             | O/G           |             |  |                 | STR Location          |  |
| 020667   | Shell I        | Pipe                       | Line Corp               | ddress<br>).                          |                    | 045421           | 0           | 0             |             | ······································   | and Desc        | ription               |  |
|  |                |                            | 910, Midla              |                                       | 79701              |                  | 0101210     |               |             |  |                 |                       |  |
|  |                |                            |                         |                                       |                    |                  |             | ii.           |             |  |                 |                       |  |
|  |                |                            |                         | · · · · · · · · · · · · · · · · · · · |                    |                  |             |               |             |  |                 |                       |  |
|  |                |                            |                         |                                       |                    |                  |             |               |             |  |                 |                       |  |
|  |                |                            |                         |                                       |                    |                  |             |               |             |  |                 |                       |  |
| IV. Prod   | uction \       | Wate                       | er                      |                                       |                    |                  |             |               |             |  |                 |                       |  |
| PC   | D              |                            |                         |                                       |                    | POD              | ULSTR Loca  | tion and Desc | ription     |  |                 |                       |  |
| V. Well  | Comple         | otion                      | Data                    |                                       |                    |                  |             |               |             |  | ·               |                       |  |
|  | ud Date        | - CIOII                    | Data                    | Ready D                               | ate                |                  | TD          |               |             | PBTD                                     |                 | Perforations          |  |
|  |                |                            | ·                       |                                       |                    |                  |             |               |             |  |                 |                       |  |
|  | Hole Size      | :                          | Casing & Tub            |                                       | Casing & Tubin     | ng Size          |             | Depth Set     |             |  |                 | Sacks Cement          |  |
|  |                |                            |                         | ·                                     |                    |                  |             |               |             |  |                 |                       |  |
|  |                |                            |                         |                                       |                    |                  |             |               |             |  |                 |                       |  |
| VI. Well   | Test Da        | ata.                       |                         |                                       |                    |                  |             |               |             |  |                 |                       |  |
| Date N   |                | T T                        | Gas Delivery Date       |                                       |                    | Test Date        | Test Length |               | <u> </u>    | Tbg. Pressure                            |                 | Csg. Pressure         |  |
| Choke Size   |                |                            |                         |                                       |                    |                  |             |               |             |  |                 |                       |  |
|  |                | OII                        |                         | Water                                 | Water              |                  | Gas A       |               |             | Test Method                              |                 |                       |  |
| I hereby certify tha   | it the rules o | of the O                   | il Conservation         | n Division hav                        | l<br>ve been       |                  |             |               |             |  |                 | <u> </u>              |  |
| complied with and  | that the info  | ormatio                    | n given above           | is true and co                        | omplete to the     |                  |             |               |             |  |                 |                       |  |
| best of my knowle  |                |                            | _                       | ,                                     | ,                  |                  |             |               |             |  |                 |                       |  |
| Signature: Debbre Newcomb  |                |                            |                         |                                       |                    | Approved t       | Jy:         |               | •           |  | ORIGINAL SIGNED |                       |  |
| Printed Name:  |                |                            |                         |                                       |                    | Title: GARY MINK |             |               |             |  | GATSY WINK      |                       |  |
| Debbie I   | Newcom         | nb                         |                         |                                       |                    |                  | Approval D  | ate:          | CED         | 1  |                 | ***                   |  |
| Senior Production Clerk  |                |                            |                         |                                       |                    |                  | Approvar    |               | JLP .       | 15 19 <b>98</b>                          |                 |                       |  |
| Date: 09   | /08/199        | 8                          |                         | Ph                                    | none: 915/683      | 3-0564           |             |               |             |  |                 |                       |  |
| If this is a ch  | ange of oper   | rator fil                  | I in the OGRID          | number and                            | name of the previo | ous operator     |             |               |             |  |                 |                       |  |
| Previou  | s Operator S   | Signatu                    | re                      |                                       |                    | Printed Name     |             | Title         | <del></del> |  |                 | Date                  |  |