District d PO Box District II

State of New Mexico

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office

NO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410

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

5 Copies

District IV PO Box 2003, 8	ianta Fe, I	√M 87504-	2088			,	0,00	. 2000	,				ENDED REPOR	
I.			EST	FOR A	LLOWA	BLE A	ND AU	JTHOI	RIZAT	TOT NO				
Operator name and Address SOUTHWEST ROYALTIES										OGRID Number				
	OX 1	021355 * Reason for Filling Code												
MIDLAND, TX 79702											ש מטט בכב			
*API Number Pool Name											FOD		8/1/9 Pool Code	
30 - 0 <sub>25-</sub>				SCARBOUGH YATES SEVE				N RIVERS			5	5560	root Couc	
	operty Co	de						roperty Name				' Well Number		
018097				EVANS	В						20	0		
Ul or lot no.	10 Surface Locat t no.   Section   Towns			Range	Lot.Idn	Feet fro	om the	I Nombis	outh Line	Feet from the	1 4			
I	30	<b>26</b> S		37E		1	414		JTH	429	EAST/V	Vest line ST	County LEA	
		m Hole Lo											L L / 1	
UL or lot no.	Section			Range	Lot Idn Feet		om the North/Sout		South line	Feet from the	East/V	East/West line Count		
12 Lee Code F	<sup>13</sup> Produ	icing Meth	od Cod	de 14 Gas	Connection D	ate 15	C-129 Pern	nit Number	r '	C-129 Effective	Date	" C-	129 Expiration Date	
III. Oil a	nd Gas	Trans	port	ers	•			<del> </del>			<del></del> -	<u> </u>		
Transpor	rter			Transporter I and Addres			и РС	<sup>14</sup> POD <sup>11</sup> O/G		<sup>21</sup> POD ULSTR Location and Description				
007440					TING LP	ا ا	2517	シスる	0	-			·	
<b>2000</b>		O. B MOUSTO		1666 X 77210	-4666					C-30-26S-37E				
020809		SID RICHARDSON GASOLINE CO.						2199430 G			, 30-203-37L			
		201 MAIN ST. FORT WORTH, TX 76102					21334							
<b>2.</b> 2.7.7.7.2						*								
V. Produ	iced W	ater												
	POD よえ <sup>C</sup>	P				-	<sup>2</sup> POD UI	LSTR Loca	tion and D	escription				
V. Well (		tion D	ata		<del></del>									
<sup>13</sup> Spud Date				H Ready Da	te		מד יי		" PBTD		Т	1º Perforations		
				* 0										
	Hole Siz	iż Sas			sing & Tubing Size		_	32 Depth Set				<sup>33</sup> Sacks Cement		
	·		-				_							
		<del></del>	_	<u> </u>										
VI. Well	Test D	ata											· · · · · · · · · · · · · · · · · · ·	
M Date No				Oclivery Date >		est Date		<sup>27</sup> Test Length		M Tbg. Pressure		<sup>30</sup> Cag. Pressure		
<sup>48</sup> Choke Size			41 C	Dil 4 Water			45 Gas			" AOF			4 Test Method	
<sup>46</sup> I hereby certif with and that the knowledge and b Signature: Printed name:	elief.	nules of the on given ab	ove is t	hill .	vision have be	en complied t of my	Approve		Orig. Pat	NSERVATI Signed by 11 Kautz cologist	ON D	)IVISI	ON	
Title: REGULATORY ANALYST								Approval Date:						
Date: {	8/21/9	6		Phone: 91	5/686-9	927 Ex	307	<del></del>			,		<u></u>	
a If this is a ch	ange of or	erator fill	in the	OGRID num	ber and name	of the pre	vious opera	lor						
<del></del>	Previous	Operator	Signatu	ire	<del></del>	·····	Printe	d Name			Tie	le	Date	