

STATE OF NEW MEXICO  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator Name and Address Strata Production Company P. O. Box 1030 Roswell, New Mexico 88202-1030		2. OGRID Number 021712
		3. Reason for Filing Code CO Effective January 1, 1996
4. API Number 30-015-24889	5. Pool Name Scanlon Delaware	6. Pool Code 55500
7. Property Code 010733	8. Property Name Lee Federal	9. Well Number #4Y

## II. 10. Surface Location

UL or Lot No.	Section	Township	Range	Lot Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
L	25	20S	28E		2100	South	330	West	Eddy

### 11. Bottom Hole Location

UL or Lot No	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-129 Exp Date
F	P								

### III. Oil and Gas Transporters

[illegible]

#### IV. Produced Water

23. POD	24. POD ULSTR Location and Description
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## V. Well Completion Data

25. Spud Date	26. Ready Date	27. TD	28. PBTD	29. Perforations
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 Size	41. Oil	42. Water	43. Gas	44. AOF	45. Test Method

46. 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.		OIL CONSERVATION DIVISION  <b>ORIGINAL SIGNED BY TIM W. GUN</b> <b>DISTRICT II SUPERVISOR</b>	
Signature:	<i>Carol J. Garcia</i>	Approved By:	
Printed name:	Carol J. Garcia	Title:	
Title:	Production Records Manager	Approval Date:	<b>FEB 1 1996</b>
Date:	1/24/96	Phone:	505-622-1127

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