

BURLINGTON RESOURCES

2005 JUN 7 PM 12 52

PRODUCTION ALLOCATION FORM

Distribution:
Regulatory
Accounting
Well File

Original: August 1, 2003

Status
PRELIMINARY ☐
FINAL ☒

Type of Completion

NEW DRILL ☒ RECOMPLETION ☐ PAYADD ☐ COMMINGLE ☐

Date: 7/1/2004

API No.
30-045-3082

Well Name

ELLIOTT FEDERAL 22

Well No.

#1M

Unit Letter
P

Section
22

Township
T30N

Range
R11W

Footage
990' FSL & 660' FEL

County, State
San Juan County, New Mexico

Completion Date

6/24/04


Test Method

HISTORICAL ☐ FIELD TEST ☒ PROJECTED ☐ OTHER ☐

FORMATION	GAS	PERCENT	CONDENSATE	PERCENT
CHACRA	504 MCFD	22%		22%
MESAVERDE	1337 MCFD	59%		59%
DAKOTA	442 MCFD	19%		19%


JUSTIFICATION OF ALLOCATION: These percentages are based upon isolated flow tests from the Chacra, Mesaverde and Dakota formations during completion operations. Oil was not present during flow test operations. For that reason, oil percentages are based upon the gas allocation and are provided in the event this wellbore begins producing oil at some point in the future.

APPROVED BY	TITLE	DATE
Leonard Biemer	Engineer	7/1/04
Cherylene Charley	Engineering Technician	7/1/04

2. Article Number  7110 6605 9590 0008 7060	COMPLETE THIS SECTION ON DELIVERY A. Signature X <i>Nancy Kavanagh-Shiershke</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Nancy Kavanagh-Shiershke</i> C. Date of Delivery <i>8-7-04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES enter delivery address below:
1. Article Addressed to: KAVANAGH-SHIERSHKE FAMILY TR DTD 12/27/95 505 VAQUERO RD ARCADIA, CA 91007 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes


PS Form 3811

Domestic Return Receipt

2. Article Number  7110 6605 9590 0008 7091	COMPLETE THIS SECTION ON DELIVERY A. Signature <i>Robert E McAlister</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>ROBERT MCALISTER</i> C. Date of Delivery <i>10 Aug 04</i> D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If YES enter delivery address below: <i>114 E RINGGATE DR</i> <i>GARLAND TX 75040-3580</i>
1. Article Addressed to: ROBERT E MCALISTER 817 SINGING HILLS DR GARLAND, TX 75044-4128 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  7110 6605 9590 0008 6995	COMPLETE THIS SECTION ON DELIVERY A. Signature X <i>Carolyn Harvey</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>CAROLYN HARVEY</i> C. Date of Delivery <i>8-16-04</i> D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If YES enter delivery address below: <i>204 SW 12TH</i> <i>SEMINOLE TX 79360</i>
1. Article Addressed to: GARY W HARVEY INDEP EXEC H W SMITH ESTATE 300 SW 21ST ST SEMINOLE, TX 79360-3820 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number



7110 6605 9590 0008 7015

1. Article Addressed to:

JAMES M FORGOTSON III
2808 WALNUT

NORMAN, OK 73072-7504

7/13/2004 4:15 PM

Code: Elliott Federal 22 1M

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES enter delivery address below: ☐ No

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number

7110 6605 9590 0008 7022

1. Article Addressed to:

JAMES M FORGOTSON JR
8 RUSTIC HILLS

NORMAN, OK 73072

7/13/2004 4:15 PM

Code: Elliott Federal 22 1M

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES enter delivery address below: ☐ No

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number



7110 6605 9590 0008 6971

1. Article Addressed to:

ELLIOTT-HALL COMPANY
PO BOX 1231

OGDEN, UT 84402

7/13/2004 4:15 PM

Code: Elliott Federal 22 1M

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES enter delivery address below: ☐ No

3. Service Type


☒ Certified


4. Restricted Delivery? (Extra Fee)


☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  7110 6605 9590 0008 7046	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> <i>Jo Anne Treloar</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <i>Jo Anne Treloar</i> C. Date of Delivery <i>8-6-04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES enter delivery address below:
1. Article Addressed to: JO ANNE MOSS TRELOAR 4951 PARADISE RD SANTA BARBARA, CA 93105 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811 Domestic Return Receipt	

2. Article Number  7110 6605 9590 0008 6926	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> <i>Ruth Orewiler</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <i>Ruth Orewiler</i> C. Date of Delivery <i>8/7/04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES enter delivery address below:
1. Article Addressed to: DANIEL OREWILER 611 S BROADWAY PENDLETON, IN 46064 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811 Domestic Return Receipt	

2. Article Number  7110 6605 9590 0008 6919	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> <i>P. Gregory</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <i>Pat Gregory</i> C. Date of Delivery <i>8/6/04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES enter delivery address below:
1. Article Addressed to: CONOCOPHILLIPS COMPANY ATTN CHIEF LANDMAN SAN JUAN/ROCKIES PO BOX 2197 - Pat Gregory HOUSTON, TX 77252-2197 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811 Domestic Return Receipt	

2. Article Number 7110 6605 9590 0008 7077	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> <i>Gretchen Tracy</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>GRETCHEN TRACY</i> C. Date of Delivery <i>8/05/04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: PEAK ENERGY RESOURCES INC 3473 MAIN AVE STE 23 DURANGO, CO 81301 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number 7110 6605 9590 0008 7084	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> <i>Charles E. Phillipy</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>CHARLES E. PHILLIPY</i> C. Date of Delivery <i>AUG 06 2004</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: PHYLLIS G PHILLIPY PO BOX 53013 INDIANAPOLIS, IN 46253-0013 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes


PS Form 3811

Domestic Return Receipt

2. Article Number 7110 6605 9590 0008 6940	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> <i>Ann Forgotson</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Ann Forgotson</i> C. Date of Delivery <i>8-6-04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: EDWARD H FORGOTSON 2104 FOOTHILL RD SANTA FE, NM 87505-4519 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes


PS Form 3811

Domestic Return Receipt

2. Article Number  7110 6605 9590 0008 6988 1. Article Addressed to: <p style="text-align: center;">FORGOTSON FAMILY PTSHP R/E EDWARD H FORGOTSON SR AGENT 2104 FOOTHILL RD SANTA FE, NM 87505</p> <p>7/13/2004 4:15 PM Code: Elliott Federal 22 1M</p>	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>A. Forgotson</i> B. Received by (Printed Name) <i>A. Forgotson</i> C. Date of Delivery <i>8-6-04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No E. Is delivery address below: F. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
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PS Form 3811

Domestic Return Receipt

2. Article Number  7110 6605 9590 0008 7114 1. Article Addressed to: <p style="text-align: center;">SCHULTZ HENRIETTA TR FRANK & HENRIETTA SCHULTZ REV 500 N AKARD SUITE 2940 DALLAS, TX 75201</p> <p>7/13/2004 4:15 PM Code: Elliott Federal 22 1M</p>	COMPLETE THIS SECTION ON DELIVERY A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>x Paul Smith</i> B. Received by (Printed Name) C. Date of Delivery <i>AUG 05 2004</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No E. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
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PS Form 3811


Domestic Return Receipt


Article Number  7110 6605 9590 0008 7008 1. Article Addressed to: <p style="text-align: center;">J BURTON VETETO 607 ABO HOBBS, NM 88240</p> <p>7/13/2004 4:15 PM Code: Elliott Federal 22 1M</p>	COMPLETE THIS SECTION ON DELIVERY A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>x J. Burton Veteto</i> B. Received by (Printed Name) <i>Burton Veteto</i> C. Date of Delivery <i>9-4-04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No E. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
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PS Form 3811


Domestic Return Receipt


2. Article Number  7110 6605 9590 0008 6933	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>[Signature]</i> B. Received by (Printed Name) C. Date of Delivery 8-5 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: DOMINION OKLAHOMA TEXAS EXPLORATION & PRODUCTION INC 14000 QUAIL SPRINGS PKWY STE 600 OKLAHOMA CITY, OK 73134-2600 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	
PS Form 3811 Domestic Return Receipt	


2. Article Number  7110 6605 9590 0008 7053	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>[Signature]</i> B. Received by (Printed Name) C. Date of Delivery David Silverman 8-3-04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: JULIE ANN ANTWEIL TRUST 4408 CANYON CT NE ALBUQUERQUE, NM 87111 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	
PS Form 3811 Domestic Return Receipt	

2. Article Number  7110 6605 9590 0008 6964	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>[Signature]</i> B. Received by (Printed Name) C. Date of Delivery 8-4-04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: ELLIOTT INDUSTRIES PO BOX 3300 ROSWELL, NM 88202 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	
PS Form 3811 Domestic Return Receipt	

REORDER FROM U.S.

2. Article Number  7110 6605 9590 0008 7145	COMPLETE THIS SECTION ON DELIVERY A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Steve Williams</i> B. Received by (Printed Name) C. Date of Delivery Steve Williams 8-4-04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No E. Service Type <input checked="" type="checkbox"/> Certified F. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
1. Article Addressed to: XTO ENERGY INC 810 HOUSTON ST STE 2000 FORT WORTH, TX 76102-6298 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	
PS Form 3811 Domestic Return Receipt	

2. Article Number  7110 6605 9590 0008 7107	COMPLETE THIS SECTION ON DELIVERY A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>[Signature]</i> B. Received by (Printed Name) C. Date of Delivery [Signature] [Signature] D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No E. Service Type <input checked="" type="checkbox"/> Certified F. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
1. Article Addressed to: ROBERT M WILLIAMS 5 DOVEKIE CT NANTUCKET, MA 02554 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	
PS Form 3811 Domestic Return Receipt	

2. Article Number  7110 6605 9590 0008 7039	COMPLETE THIS SECTION ON DELIVERY A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>[Signature]</i> B. Received by (Printed Name) C. Date of Delivery Jim L SHARP 8-9-04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No E. Service Type <input checked="" type="checkbox"/> Certified F. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
1. Article Addressed to: JIM L SHARP 1020 FOXWOOD LANE WYLIE, TX 75098 7/13/2004 4:15 PM Code: Elliott Federal 22 1M	
PS Form 3811 Domestic Return Receipt	

2. Article Number

COMPLETE THIS SECTION ON DELIVERY



7110 6605 9550 0008 7138

1. Article Addressed to:

UNITED PIPE SUPPLY CO
3622 RANCH CREEK DR
AUSTIN, TX 78730

7/13/2004 4:15 PM

Code: Elliott Federal 22 1M

PS Form 3811

Domestic Return Receipt

A. Signature

X

D. Doherty

☐ Agent

☒ Address

B. Received by (Printed Name)

SSAKIN

C. Date of Delivery

8-9-02

D. Is delivery address different from item 1? ☐ Yes
if YES enter delivery address below: ☐ No

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)

☐

Yes

1. Article Addressed to:

UNITED PIPE SUPPLY CO
3622 RANCH CREEK DR
AUSTIN, TX 78730

7/13/2004 4:15 PM

Code: Elliott Federal 22 1M

PS Form 3811

Domestic Return Receipt