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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-100  
Superseded by O-100-1  
Effective 1-1-79

**CASINGHEAD GAS MUST NOT BE  
FLARED ANY MORE 5/1/81  
UNLESS AN EXCEPTION TO R-1970  
IS OBTAINED.**

I. OPERATOR  
Operator  
R. L. BURNS CORP.  
Address  
5110 FIRST INTERNATIONAL BLDG., DALLAS, TEXAS 75270  
Reasons for filing (check proper box)  
New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership, give name and address of previous owner

**THIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE.**

II. DESCRIPTION OF WELL AND LEASE  
Lease Name STATE "30" COM Well No. 3 Pool Name, including Formation BAUM (UPPER PENN) Kind of Lease STATE K-5371, K-312 & LG-7362  
Location  
Hole Number 0 660 Feet From The South 1980 Feet From The East  
Line of Section 30 Township 13-S Range 33-E, NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is sent)
THE CRUDE COMPANY	P. O. BOX 1968, Casper Wyoming, 82602
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is sent)
WARREN PETROLEUM	P. O. BOX 1589, TULSA, OKLAHOMA 74102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When Should be connected by April 18, 1981
0 30 13-S 33-E	NO-FLARING

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Result <input type="checkbox"/>
Date Spudded 101/10/80	Date Compl. Ready to Prod. 2/17/81
Elevations (DF, RAB, RT, GR, etc.) 4284.9' GR	Name of Producing Formation Bough "C" & "B"
Perforations 9720'-9828'	Depth Casing Shoe 9944'
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE 17-1/2"	CASING & TUBING SIZE 13-3/8"
11"	8-5/8"
7-7/8"	5-1/2"
	2-7/8"
DEPTH SET 427'	SACKS CEMENT 450
4054.04'	1800
9952.05'	500
9861.68'	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 2/18/81	Date of Test 3/1/81	Producing Method (Flow, pump, gas lift, etc.) Pump
Length of Test 24-Hr.	Tubing Pressure ---	Casing Pressure 50#
Actual Prod. During Test	Oil-Bbls. 63	Water-Bbls. 20
		Gas-MCF ---

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

PRODUCTION MANAGER

(Title)

March 6, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED WCF 24 1981, 19  
BY James H. Hester  
TITLE SUPERVISOR DISTRICT

This form is to be filed in compliance with RULE 111.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the hydraulic tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

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