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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

Operator Burleson & Huff	
Address P. O. Box 935	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Anadarko Federal NM-6863	Lease No.	Well No. 3	Pool Name, Including Formation Querecho Plains Queen	Kind of Lease State, Federal or Fee Federal
Location				
Unit Letter L	1650	Feet From The South	Line and 990	Feet From The West
Line of Section 27	Township 18-S	Range 32-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 to be sent)					
The Permian Corporation	Box 1183, Houston, Texas					
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 to be sent)					
Phillips Petroleum Company	Bartlesville, Oklahoma 74004					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 27	Twp. 18S	Rge. 32E	Is gas actually connected? Yes.	When 2-8-74

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-26-73	Date Compl. Ready to Prod. 2-8-74	Total Depth 4060'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3721.2 GR	Name of Producing Formation Queen	Top Oil/Gas Pay 3875'	Tubing Depth 3780					
Perforations Open hole from 3830 to 4060			Depth Casing Shoe 3830					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/8"	10-3/4		717'		525			
10-3/4"	7"		3830		225			
7"	2"		3780					

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)

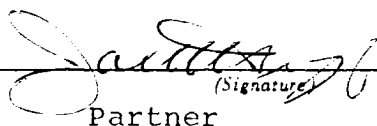
Date First New Oil Run To Tanks 2-8-74	Date of Test 2-8-74	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 24 hour	Tubing Pressure 50#	Casing Pressure 325#	Choke Size 16/64
Actual Prod. During Test 51	Oil-Bbls. 51	Water-Bbls. 0	Gas-MCF 56.1

GAS WELL

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


(Signature)

Partner

(Title)

2-15-74

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY 

TITLE _____

This form is to be filed in compliance with RULE 1104.

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

All sections of this form must be filled out completely for 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.