DISTRIBUTION		
S-NTA FE		
FILE		
L.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
- AANST ORTER	GAS	
OPERATOR		
PROBATION OFFICE		

NEW MEXICO OIL CONSERVATION CON SION

	FILE	REQUES	ST FOR ALLOWABLE	Supersedes Old C-104 and C-	
	L.S.G.S.	ALITHODIZATION TO T	AND	Effective 1-1-65	
	LAND OFFICE	OUTHORIZATION TO T	RANSPORT OIL AND NATUR	PAL GAS	
	TRANSPORTER OIL				
	OPERATOR GAS				
1	PRORATION OFFICE				
	Operator				
	Lewis B. Burleson,	Inc.			
	Box 2479, Midland, Reason(s) for filing (Check proper t	Texas 79702			
	New Well	Change in Transporter of:	Other (Please explain)	
	Recompletion	Oil Dry	Gas X re-test to g	as well and new field	
	Change in Ownership	Casinghead Gas Cond	densate designation		
	If change of ownership give name and address of previous owner				
II.	DESCRIPTION OF WELL AN	DLEASE Morth Quire	cho Plains Yast	les Das R-6536	
	Berry Federal	Well No. Pool Name, Including 1 Ouerecho Pl			
	Location			200.0	
	Unit Letter;;	Feet From The West	ine andFeet F	rom The north	
		.	32 East , NMPM,	Lea	
II.	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G		County	
44.	Name of Authorized Transporter of C	or Condensate	Address (Give address to which a	approved copy of this form is to be sent)	
	The Permian Corporat Name of Authorized Transporter of C		Box 1183 Houston, 1	Texas 77001	
	El Paso Natural Gas		Box 1492, El Pas	approved copy of this form is to be sent)	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
l	give location of tanks.	E 35 18 32	no	soon	
V.	If this production is commingled v	with that from any other lease or pool	, give commingling order number:		
	Designate Type of Complet	ion - (X)	New Well Workover Deeper	Plug Back Same Res'v. Diff. Res'v.	
	Date Spudded 5-10-80	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
+	Elevations (DF, RKB, RT, GR, etc.)	6-25-80 Name of Producing Formation	4165 Top Oil/Gas Pay	3900	
	3715.2 GL	Yates	3249	Tubing Depth 3205	
	3249, 50, 52, 54, 55	56 57 50 50		Depth Casing Shoe	
ł	3243, 30, 32, 34, 33		ID CEMENTING RECORD	4165	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	10-3/4		372	250 circ to surface	
-	7-7/8	4-1/2	4165	1000 sx, cir to surface	
-					
7. 5	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a	after recovery of total volume of load	oil and must be equal to or exceed top allow-	
٠,	DIL WELL Date First New Oil Run To Tanks	able for this d	epin or be for full 24 hours)	•	
	Delet in item of Italian to Italia	Date of Test	Producing Method (Flow, pump, ga	is lift, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
-	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF	
				GGB-MCF	
,	GAS WELL				
_	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	342 MCFPD	Tubing Pressure (Shut-in)		O	
	Testing Method (pitot, back pr.)		Casing Pressure (Shut-in)	Choke Size	
Ĺ	back pressure	1203.2	1203.2	1/4	
. С	ERTIFICATE OF COMPLIAN	CE	OIL CONSER	VATION COMMISSION	
I	hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	1980	
C	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Orig. Sig		
	·		Jerry Se	x son	
	In R.		TITLE Dist L S		
	Signature) President (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 allow-		
	11-10-80	······/	able on new and recompleted	weils.	
	(Da	ite)	Fill out only Sections I, well name or number or transp	II, III, and VI for changes of owner,	