MATADOR PETROLEUM CORPORATION

SUITE 158, PECAN CREEK 8340 MEADOW ROAD DALLAS, TEXAS 75231-3751 (214) 987-3650 FAX: (214) 691-1415

May 15, 1997

State of New Mexico Oil Conservation Division Pacheco Building 2040 South Pacheco Santa Fe, NM 87505

Dear Division:

Matador is in receipt of a request for waiver by Mallon Oil Company for a Notification of Surface Commingling for the Mallon 34 Federal No. 7 well, SENE Section 34-T19S-R34E, Unit H, Lea County, New Mexico. Enclosed is a copy of the request for your referenced. Please accept this letter as our formal objection to the request of Mallon Oil Company for such commingling.

If there are any further procedures which we must undertake to formally object to this proposal, please notify us at the above address. If you have any questions, please contact me at (214) 987-7117.

Sincerely

C. Barry Osborne

CBO/dm

cc: State of New Mexico ∨ Oil Conservation Division 1000 W. Broadway P. O. Box 1980 Hobbs, NM 88240



a Mallon Resources subsidiary

April 30, 1997

Matador Petroleum Corporation Attn: Frank Burke 8340 Meadow Road, Suite 158 Dallas, TX 75321-3751

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Re: Notification of Surface Commingling Mallon 34 Federal No. 7 SENE Section 34-T19S-34E, Unit H Lea County, New Mexico

Dear Sirs:

Mallon Oil Company has applied to the New Mexico Oil Conservation Division for approval to surface commingle production from the Grayburg formation in the above referenced well with Delaware production in the common tank battery located in Unit "A" (NENE) Section 34-T19S-R34E.

We respectfully request your waiver of objections to our application and ask that you sign and return this letter to the letterhead address. The letter will then be forwarded to the New Mexico Oil Conservation Division. Objections to this proposal must be made to the Conservation Division within twenty days of the date of this letter. M_{du} , 30^{\prime}

If I can be of further help, please advise.

Sincerely,

D. M. Erickson VP - Operations

DME/liw

Burlington Resources Oil & Gas Co.

Ву:____

Title:____

Date:_____

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