

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator Name and Address Strata Production Company P. O. Box 1030 Roswell, New Mexico 88202-1030		2. OGRID Number 021712
		3. Reason for Filing Code CO Effective February 1, 1998
4. API Number 30-025-31495	5. Pool Name Livingston Ridge Delaware East	6. Pool Code 39366
7. Property Code 010732	8. Property Name Lechuza Federal	9. Well Number #1

II. 10. Surface Location

UL or Lot No.	Section	Township	Range	Lot Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
M	15	22S	32E		862	South	458	West	Lea

11. Bottom Hole Location

UL or Lot No	Section	Township	Range	Lot Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
12. Lse Code F	13. Producing Method Code P	14. Gas Connection Date		15. C-129 Permit Number		16. C-129 Effective Date		17. C-129 Exp Date	

III. Oil and Gas Transporters

18. Transporter OGRID	19. Transporter Name and Address	20. POD	21. O/G	22. POD ULSTR Location and Description
037480	EOTT Energy Operating LP PL P. O. Box 4666 Houston, Texas 77210-4666	2447710	O	M-15-22S-32E

IV. Produced Water

23. POD	24. POD ULSTR Location and Description
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V. Well Completion Data

25. Spud Date	26. Ready Date	27. TD	28. PBTD	29. Perforations
30. Hole Size	31. Casing & Tubing Size	32. Depth Set		33. Sacks Cement

VI. Well Test Data

34. Date New Oil	35. Gas Delivery Date	36. Test Date	37. Test Length	38. Tbg. Pressure	39. Csg. Pressure
40. Choke Size	41. Oil	42. Water	43. Gas	44. AOF	45. Test Method

46. I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION DIVISION ORIGINAL SIGNED BY CHRIS WILLIAMS SUPERVISOR	
Signature: Carol J. Garcia		Approved By:	
Printed name: Carol J. Garcia		Title:	
Title: Production Records Manager		Approval Date: APR 1 1998	
Date: 1/22/98	Phone: 505-622-1127		

47. If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date