

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 January 1, 1996
4. API Number 30-025-31603	5. Pool Name Livingston Ridge Delaware East	6. Pool Code 39366
7. Property Code 010732	8. Property Name Lechuza Federal	9. Well Number #2

II. 10. Surface Location

UL or Lot No. K	Section 15	Township 22S	Range 32E	Lot Idn	Feet From The 1650	North/South Line South	Feet From The 1650	East/West Line West	County Lea
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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 007440	19. Transporter Name and Address EOTT Energy Operating LP P. O. Box 4666 Houston, Texas 77210-4666	20. POD 2447710	21. O/G O	22. POD ULSTR Location and Description 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.

Signature: Carol J. Garcia
Printed name: Carol J. Garcia
Title: Production Records Manager
Date: 1/24/96 Phone: 505-622-1127

OIL CONSERVATION DIVISION
ORIGINAL SIGNED BY
GARY WINK
FIELD REP. II
Approved By:
Title:
Approval Date: JAN 31 1996

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
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