

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Strata Production Company		Well API No. 30-025-31603
Address P. O. Box 1030, Roswell, New Mexico 88202-1030		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lechuza Federal	Well No. #2	Pool Name, Including Formation East Livingston Ridge Delaware	Kind of Lease State Federal or Test	Lease No. NM-27805
Location Unit Letter K : 1650 Feet From The South Line and 1650 Feet From The West Line Section 15 Township 22 South Range 32 East, 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"/> Petro Source Partners, Ltd	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1356, Dumas, Texas 79029					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EOTI Energy Corp	Address (Give address to which approved copy of this form is to be sent) Effective 1-1-93					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 15	Twp. 22S	Rge. 32E	Is gas actually connected? No	When? Negotiating contract

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 5/27/92	Date Compl. Ready to Prod. 6/22/92	Total Depth 8759'		P.B.T.D. 8719'				
Elevations (DF, RKB, RT, GR, etc.) 3728' GR	Name of Producing Formation Delaware	Top Oil/Gas Pay 8012'--8014'		Tubing Depth 8323'				
Perforations 7108'--7134', 7226'--7307', 7380'--7387', 7766'--7770', 8012'--8014'				Depth Casing Shoe 8759'				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		600'		300sx Halilite, 200sx PP			
11"	8 5/8"		4482'		375sx PP			
7 7/8"	5 1/2"		8759'		1395sx 50/50 Poz Mix			
	2 7/8"		8323'					

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 Tank 6/22/92	Date of Test 6/28/92	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure -0-	Casing Pressure 35#	Choke Size -0-
Actual Prod. During Test 375	Oil - Bbls. 212	Water - Bbls. 163	Gas- MCF 143

GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations 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, Production Supervisor
Printed Name
7/10/92
Date
505-622-1127
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 15 '92

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.