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,ppropriate District Office
DISTRICT 1
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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

I.

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Strata Production Company Address P. O. Box 1030, Roswell, New Mexico 88202-1030 Reason(s) for Filing (Check proper box) New Well Change in Transporter of: Recompletion Oil Dry Gas Change in Operator Casinghead Gas Condensate THIS WELL HAS DEED IN THE COMP	Operator			or or troit		. 0, 1, 12 0,		A DI No			ו	
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II. DESCRIPTION OF WELL AND LEASE Lechuza Federal #38 Foot Name Lechuza Federal #38 Livingston Ridge Playare Eas State Research Well May Lechuza Federal Min 27805 Lection Unit Lear 0	and address of previous operator			THIS WELL	HAS BEEN F	LACED IN	THE POOL	L			_	
Lease Name Lechuza Federal #3 Ivingston Ridge Delaware East SAM Redemblance NM-27805	II DESCRIPTION OF WELL	ANDIEASE		NOTIFY THIS	BELOW. IF	YOU DO NO	OT CONCL	JR		,		
Lecation Unit Letter 0 : 660 Feet From The South Lise and 2310 Feet From The East Lise Section 15 Township 22 South Range 32 East NAPM, Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL CAS. Name of Authorized Transporter of Oil Transport of Castinghand Class Transpor								of Lease	L	ease No.	7	
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Name of Authorized Transporter of Calleghead Gas		X	ndensate]	
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If well produces oil or liquids, with Sec. Twp. Rge. It gas actually connected? When 7 11/9/92 11/9/92 11/9/92 When 7 11/9/92 11			or:	Dry Gas	Address (Giv	e address to w	hich approve	d copy of this f	orm is to be se	מו) בער אר	404	
If this production of tanks. M 15 22S 32E Yes 11/9/92	<u> </u>	ion			+				iesville	e, UK /4	1004	
If this production is commissipled with that from any other lease or pool, give commingling order number. IV. COMPLETION DATA Designate Type of Completion - (X) Disc Spadded Date Compl. Ready to Prod. 10/7/92 11/9/92 11/9/92 10/7/92 11/9/92 10/7		•					Whe		/02			
Due Spadded Due Completion - (X)							l	11/9	/ 92		J	
Designate Type of Completion - (X) Oil Well Oss Well New Well Workover Deepen Plug Back Same Res' Diff Res' Due Spadded Date Compl. Ready to Prod. 10/7/92 8950' 8950' 8910' 11/9/92 8950' 1000 8875' Elevations (Dir. Ret. R. F. G.R. etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth 8875' 8875' B875' Perforations 7381'-7386'; 7244'-7251' Depth Casing Shoe 8910' TUBING, CASING AND CEMENTING RECORD 8910' HOLE SIZE CASING A TUBING SIZE DEPTH SET SACKS CEMENT 17 1/2 13 3/8" 620' 300 Hal Lite 200Class 11" 8 5/8" 4492' 1300 Hal Lite; 200Class C"; 11" 8 5/8" 4492' 1300 Hal Lite; 200Class C"; 7 7/8" 5 1/2" 8950' 1425 50/50 Poz V. TEST DATA AND REQUEST FOR ALLOWABLE 2 7/8" 8875' VI. TEST DATA AND REQUEST FOR ALLOWABLE 2 7/8" 8875' OIL WELL Creat 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 Date of Tes Producing Method (Flow, pump, gas life, etc.) 11/9/92 12/25/92 Pump ing Length of Tes Tubing Pressure Casing Pressure Choke Size 24 hours 25# 35# -0- Actual Prod. Test - MCF/D Length of Test Bblic. Condensate/MA/CF Gravity of Condensate VI. OPERATOR CERTIFICATE OF COMPLIANCE Interby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and compliet to the best of my knowledge and belief. VI. OPERATOR CERTIFICATE OF COMPLIANCE Interby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and compliet to the best of my knowledge and belief. VI. OPERATOR CERTIFICATE OF COMPLIANCE Interby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and c	•	from any other leas	e or pool	, give commingl	ling order num	жг					-	
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10/7/92	<u> </u>		dy to Pro	1			.l	PRTD	J	.4	1	
Elevations (DF, RRB, RT, GR, etc.) Del aware Top Oil/Cax Pay 7244'-7251' Beforeitions 7381'-7386'; 7244'-7251' 8505'-8518'; 8459'-8461' TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING A TUBING SIZE DEPTH SET 30 Hall Lite; 200Class 17 1/2 13 3/8" 620' 300 Hal Lite 11" 8 5/8" 4492' 1300 Hall Lite; 200Class Sqz 725 Hall Lite; 100 Class "C"; TUBING CASING AND CEMENTING RECORD 10 Hall (Fest 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 11/9/92 Legth of Test 24 hours 25# 35# Casing Pressure Chaing Pressure Chaing Pressure Chaing Pressure Chain Prod. Test - MCF/D Length of Test Bibis. Condensate/MMCF Gravity of Condensate 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. 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. 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. 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 rule and complete to the best of my knowledge and belief. 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 rule and complete to the best of my knowledge and belief. VI. OPERATOR CERTIFICATE OF COM	•				•							
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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 Pule 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.