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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		a re, New Me								
·	REQUEST FOR									
I.	TO TRAN	SPORT OIL	AND NA	TURAL GA						
Operator Strata Production	Company			Well API No. 30-025-31801						
Address P. O. Box 1030, Ro	swell. New Mex	ico 88202	2-1030		<u> </u>	······································				
Reason(s) for Filing (Check proper box)	Swell, new nex	100 0020		er (Please expla	vin) \					
New Well	Change in Tr	ansporter of:		i (i ieuse wyna	,					
Recompletion	· · ·	ry Gas								
Change in Operator		ondensate								
If change of operator give name and address of previous operator										
II. DESCRIPTION OF WELL	AND LEASE									
Lease Name Lechuza Federal	Well No. Po #5 L	ol Name, Includio ivingston	ng Formation Ridge D	elaware		(Lease Federal XXXX		7805		
Location					······•	 				
Unit Letter	:1650F	et From The	South Line	and 330	Fee	t From The	West	Li:	ne	
Section 15 Township	, 22 South R	ange 32 Eas	st .nn	ирм.		Lea		County		
C Secure 20 Townsamp								County		
III. DESIGNATION OF TRANS	SPORTER OF OIL	AND NATU								
Name of Authorized Transporter of Oil	Or Condensate	• 🗀		e address so wh					7040	
Petro Source Partn	9801 Westheimer, Suite 900, Houston, TX 77042									
Name of Authorized Transporter of Casinghead Gas X or Dry Gas				Address (Give address to which approved copy of this form is to be sent) 1040 Plaza Office Bldg., Bartlesville, OK 7400						
GPM Gas Corporatio							resvirie	, UK	7400	
If well produces oil or liquids, give location of tanks.						When ? 12/25/92				
If this production is commingled with that for IV. COMPLETION DATA	rom any other lease or poo	d, give comming!	ing order numb	жг						
IV. COMEDITON DATA	Oil Well	Gas Well	New Well	Workover	Deepen	Diva Back	Same Res'v	Diff Res	. 7	
Designate Type of Completion -		l Oas wen	i X	i workover	լ Deepeu լ I I	Link Dack	Same ves A	I LILL KES	`	
Date Spudded	Date Compl. Ready to Pr	od.	Total Depth	L	<u> </u>	P.B.T.D.	<u> </u>	.1		
11/27/92	12/24/92		8810'				770'			
	Name of Producing Form	Top Oil/Gas Pay			Tubing Depth					
√ 3730¹ GL	Delaware 7052			52'-7064	ļ. '		625'			
erforations						Depth Casing Shoe				
7389'-7393'; 7052'	-7064'					8	770'			
	TUBING, C	ASING AND	CEMENTI	NG RECOR	D					
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT 300 Hallite; 200 Class "(ss "C	
17 1/2"	13 3/			610'		1				
12 1/4"	8 5/			44801			1Lite;20	JU CIA	ss "C	
7 7/8"		'2"		88101	····	1405 50	/50 Poz			
W. FEGT DATA AND DEOLUC		'8"		7625'		ļ				
V. TEST DATA AND REQUES						J	C 6.11.24 L			
OIL WELL (Test must be after re Date First New Oil Run To Tank	covery of total volume of	loga ou ana musi					jor juli 24 now	3.)		
` ·	Date of Test 1/29/93	Producing Method (Flow, pump, gas lift, et Pump i ng			,			Ì		
12/25/92		Casing Pressure			Choke Size		 			
Length of Test	Tubing Pressure 25#	30#				0-				
24 hours Actual Prod. During Test	Oil - Bbls.	Water - Bbls.			Gas- MCF					
492	39	453			41					
GAS WELL	· · · · · · · · · · · · · · · · · · ·		L.,			h., .,				
Actual Prod. Test - MCF/D	Length of Test		Bbls. Conden	sate/MMCF		Gravity of	Condensate			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in	Casing Pressure (Shut-in)			Choke Size					

Carcl <u>Supervisor</u>

505-622-1127 Title Printed Name 2/17/93

Telephone No. Date

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.

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.

Title.

Date Approved

OIL CONSERVATION DIVISION

ORIGINAL MONED BY JERRY SEXTOM BISTRICK I SUPERVISOR

FEB 1 9 1993

- 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.