

DISTRICT I
PO Box 1980, Hobbs, NM 88241-1980
DISTRICT II
811 South First, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410
DISTRICT IV
2049 South Pacheco, Santa Fe, NM 87505

STATE OF NEW MEXICO
Energy, Minerals & Natural Resources Department

Form C-104
Revised February 10, 1994
Instructions on Back
Submit to Appropriate District Office
5 Copies

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

___ AMENDED REPORT

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 30-025-30833	5. Pool Name Hat Mesa Delaware	6. Pool Code 30214
7. Property Code 010736	8. Property Name New Mexico A Federal	9. Well Number #3

II. 10. Surface Location

UL or Lot No. C	Section 04	Township 21S	Range 32E	Lot Idn 2	Feet From The 660	North South Line North	Feet From The 2100	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. Use 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
007440	EOTT Energy Operating LP P. O. Box 4666 Houston, Texas 77210-4666	2448010	O	F-04-21S-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	
Signature: Carol J. Garcia		Approved By:	
Printed name: Carol J. Garcia		Title:	
Title: Production Records Manager		Approval Date: JAN 31 1996	
Date: 1/24/96 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

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

OIL CONSERVATION DIVISION

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. 30-025-30833
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 type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	Change effective April 1, 1992
Change in Operator <input type="checkbox"/>	Casinghead Gas <input checked="" 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 New Mexico A Federal	Well No. 3	Pool Name, Including Formation Hat Mesa Delaware	Kind of Lease State Federal	Lease No. NM-14791
Location Unit Letter C : 660 Feet From The North Line and 2100 Feet From The West Line Section 4 Township 21 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"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1356, Dumas, TX 79029					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 1010 Plaza Office Bldg., Bartlesville,					
GPM Gas Corporation						
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 4	Twp. 21S	Rge. 32E	Is gas actually connected? Yes	When? OK 74004 10/25/91

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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:	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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.

Carol J. Garcia
Signature
Carol J. Garcia, Production Analyst
Printed Name
4/8/92 **505-622-1127**
Date Telephone No.

OIL CONSERVATION DIVISION

APR 24 '92

Date Approved

By Carol J. Garcia

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.