

| | |
|------------------|-----|
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRORATION OFFICE | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

| | |
|--|---|
| Operator Lewis B. Burleson, Inc. | |
| Address Box 2479, Midland, TX 79702 | |
| Reason(s) for filing (Check proper box) | |
| New Well <input type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Other (Please explain) Reclassify from gas to oil | |

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|-----------|
| Lease Name Hadfield | Well No. 2 | Pool Name, including Formation Jalmat (Yates) | Kind of Lease State, Federal or Fee fee | Lease No. |
| Location | | | | |
| Unit Letter <u>P</u> : <u>660</u> Feet From The <u>south</u> Line and <u>660</u> Feet From The <u>east</u> | | | | |
| Line of Section <u>21</u> Township <u>25-S</u> Range <u>37-E</u> , NMPM, Lea County | | | | |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|--|------------|-------------|-------------|-----------------------------------|--------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation Permian (Eff. 9 / 1 / 87) | Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, TX 77251-1183 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co. * | Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, TX 79978 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit 0 | Sec. 21 | Twp. 25S | Rge. 37E | Is gas actually connected? yes | When since 1949 |

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

COMPLETION DATA

| | | | | | | | | |
|---|--------------------------------------|-------------------------|----------------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well X | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 11-7-49 | Date Compl. Ready to Prod. 5-9-85 | Total Depth 3487 | P.B.T.D. 2940 | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3051 GR | Name of Producing Formation Yates | Top Oil/Gas Pay 2878 | Tubing Depth 2888 | | | | | |
| Perforations 2878-2924 | Depth Casing Shoe | | | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 13" | 10-3/4" 40 | 200 | 150 |
| 10" | 8-5/8" 32 | 1200 | 150 |
| 9 | 7 28 | 3050 | 250 |

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)

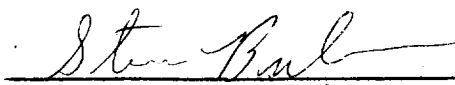
| | | | |
|---|--------------------------|---|-----------------|
| Date First New Oil Run To Tanks 12-15-86 | Date of Test 12-15-86 | Producing Method (Flow, pump, gas lift, etc.) pump (1-1/4" insert) | |
| Length of Test 24 hrs | Tubing Pressure 65 | Casing Pressure 140 | Choke Size - |
| Actual Prod. During Test | Oil-Bbls. 6 | Water-Bbls. 2 | Gas-MCF 156 |

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 |

CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Vice-President
(Title)
December 30, 1986
(Date)

*Hadsen is buying on the spot market

OIL CONSERVATION COMMISSION

APPROVED JAN 2 1987, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Form C-104 must be filed for each test to determine

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