

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. _____
Operator
Lewis B. Burleson, Inc.

Well API No. 30-025-11840

Address
P. O. Box 2479 Midland, Texas 79702

Reason(s) for Filing (Check proper box)

New Well ☐ Change in Transporter of: ☒ Other (Please explain) _____
Recompletion ☐ Oil ☐ Dry Gas ☐ XXXXXXXXXXXXXXXXXX
Change in Operator ☒ Casinghead Gas ☐ Condensate ☐ XXXXXXXXXXXXXXXXXX
If change of operator, give name of new operator: _____ To be effective 9/1/89

If change of operator give name and address of previous operator	Conoco Inc. P. O. Box 460	Hobbs, New Mexico	88241
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II. DESCRIPTION OF WELL AND LEASE

Lease Name Sholes B-30	Well No. 2	Pool Name, Including Formation Jalmat Yts-7R	Kind of Lease State, Federal or Fee	Lease No. LC-032581 (b)
Location Unit Letter D : 660 Feet From The North Line and 560 Feet From The West Line Section 30 Township T-25-S Range R-37-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
N/A						
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company					P. O. Box 1492 El Paso, Texas	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					yes	1936
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

LOGGING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

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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.

I do and comply to the best of my knowledge and belief.



Signature Steven L. Burleson Vice-President

Printed Name 8/30/89 Title 915/683-4747

Date Telephone No.

OIL CONSERVATION DIVISION

SEP 1 1989

Date Approved

By Paul Kautz
Geologist

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.