Submit 2 copies to Appropriate District Office.
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
811 S. 1st Street, Artesia, NM 88210-2834
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

Form C-116
Revised 1/1/89

6-11-97

May

GAS - OIL RATIO TEST

Operator: Burlington Resources
Pool: Jalmat Tansill Yates 7Rivers (pro gas)
County: Lea
Address: P.O. Box 51810, Midland, TX 79710-1810
TYPE OF TEST - (X): Scheduled [X] Completion [ ] Special [ ]

LEASE NAME	WELL NO.	LOCATION U	S	T	R	DATE OF TEST	STATUS	CHOKE SIZE	TBG. PRESS.	DAILY ALLOW-ABLE	LENGTH OF TEST HOURS	PROD. DURING TEST WATER BBLS.	GRAV. OIL	OIL BBLS.	GAS M.C.F.	GAS-OIL RATIO CU.FT/BBL
[redacted] Paso Tom Federal	6	J	33	25	37	4-30-97	F				24	.5		0	74	
El Paso Tom Federal	7	L	33	25	37	4-30-97	F				24	.5		1	32	3200
[redacted] Paso Tom Federal	8	P	33	25	37	4-30-97	F				24	.5		.8	69	86250 ~~8625~~
Emery King NW SOLD 5-96	1	E	1	23	36											
Emery King NW SOLD 5-96	4	F	1	23	36											
Emery King SE SOLD 5-96	1	O	1	23	36											
Federal Jalmat Com SOLD 5-95	1	D	6	25	37											
Flour Harrison SOLD 5-31-96	1	M	20	24	37											
H S Record	9	B	22	22	36	3-22-97	F				24	17		0	45	
Highland State SI 2-93	1	N	16	23	36		S									
Hodge	2	B	8	24	37	3-22-97	F				24	1		0	38	
Hodge	4	G	8	24	37	3-22-97	F				24	1		0	85	
Holt Mexico State Com	1	O	36	23	36	3-22-97	F				24	2		0	220	

Instructions:

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowables when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60°F. Specific gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.

See Rule 301, Rule 1116 & appropriate pool rules.)

I hereby certify that the above information is true and complete to the best of my knowledge and belief.

Carla Young
Signature

Carla Young Accounting Assistant
Printed name and title

5-5-97 (915) 688-6892
Date Telephone No.