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 Appropriate District Office
DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210
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

FAX & X
~~back log~~
 file

58068

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
 TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator Lewis B. Burluson, Inc.	Well API No. 30 025 26077
Address P.O. Box 2479 Midland, TX 79702	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input 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 Saunders Estate	Well No. 3	Pool Name, Including Formation Jalmat (T-Y-7R) Gas	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location				
Unit Letter <u>D</u>	<u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line			
Section <u>28</u>	Township <u>25S</u>	Range <u>37E</u>	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)				
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)				
Sid Richardson Carbon & Gasoline	201 Main St. Ft. Worth, TX 76102				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When?
					yes 9-11-92

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
		X						
Date Spudded 9/30/78	Date Compl. Ready to Prod. 9/11/92	Total Depth 3400		P.B.T.D. 2750				
Elevations (DF, RKB, RT, GR, etc.) 3029 GR	Name of Producing Formation Yates	Top Oil/Gas Pay 2489		Tubing Depth 2720				
Perforations 2489-2534		OKL2		Depth Casing Shoe				

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11 3/4	8 5/8	928	500 SX
7 7/8	4 1/2	3400	300 SX

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.)

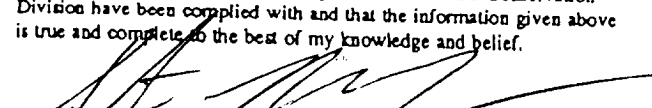
Date First New Oil Run To Tank	Date of Test 9/11/92	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 120	Length of Test 24	Bbls. Condensate/MMCF 0	Gravity of Condensate
Testing Method (pilot, back pr.) meter run	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 24	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.

Signature: 
 Steven L. Burluson Vice-President
 Printed Name
 Date: 9/16/92 Title: 915/683-4747
 Telephone No.

OIL CONSERVATION DIVISION

SEP 18 '92
 Date Approved _____
 By ORIGINAL SIGNED BY JERRY SEXTON
 DISTRICT I SUPERVISOR

Title FOR RECORD ONLY APR 30 1992

Post-It™ brand fax transmittal memo 7671 # of pages 1

To Xavier Davila	From Kierin Ross
Co. Lea Co	Co. Ft Worth
Dept.	Phone #

INSTRUCTIONS: This form is to be filed in compliance with Rule 111.

1) Request for allowable for newly drilled or deepened well must be filed with Rule 111.
 2) All sections of this form must be filled out for allowable on new wells.
 3) Fill out only Sections I, II, III, and VI for changes of operator.

RECEIVED

APR 28 1993

SCD HOBBS CT