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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

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

SEP 29 1993

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

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REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator	Santa Fe Energy Operating Partners, L.P. ✓	Well API No.	30-015-27601
Address 550 W. Texas, Suite 1330, Midland, Texas 79701			
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)			
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input 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	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Sterling Silver 33 Federal	8	Sand Dunes, W. (Delaware)	State (Federal) or Fee	NM-45236
Location				
Unit Letter	M	660	Feet From The	South
Line and	660	Feet From The	West	Line
Section	33	Township	23S	Range
31E	NMPM,	Eddy	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)	
Texaco Trading & Transportation	P. O. Box 6196, Midland, Texas 79711	
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)	
Llano, Inc.	P. O. Box 1320, Hobbs, New Mexico 88240	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	G	33
	Twp.	Rge.
	23S	31E
Is gas actually connected?	When?	
Yes	September 21, 1993	

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		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
8-16-93	9-15-93		8110'		8058'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3395' GR	Delaware		7922'		7816'			
Perforations					Depth Casing Shoe			
7922'-7962' (42 holes)					8109'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		582'		550 sx C1 C			
12-1/4"	8-5/8"		4175'		1200 sx PSL + 500 sx "C"			
7-7/8"	5-1/2"		8109'		400 H, 200 PSL + 200 "C"			
	2-7/8"		7816'					

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.)	
9-15-93	9-23-93	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	360	990	18/64"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF
	230	40	200

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, 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.

Signature  
Terry McCullough, Sr. Production Clerk

Printed Name  
Sept. 27, 1993

Date  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved SEP 29 1993

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

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.