Appropriate District Office
DISTRICT |
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Anesia, NM 88210

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

Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

I.	REQUEST	FOR ALLOY	VABLE AND	D AUTHOR	OITASIF			~	
Operator	OIL AND NATURAL GAS								
SG Interests	I, Ltd.	•				\30-045-28648			
P. O. Box 421,	, Blanco, NM	87412-042	!1					•	
Reason(s) for Filing (Check proper box				ther (Please ex)	olain)	· · ·			
New Well X		in Transporter of:	_		,,				
Recompletion	Oil [	Dry Gas							
Change in Operator	Casinghead Gas	Condensate [							
If change of operator give name and address of previous operator							·	<del></del>	
II. DESCRIPTION OF WEL	L AND LEASE Well No	10							
	luding Formation Fruitlan	1 / /		of Lease	Le	ase No.			
Location	13796 12	, Dastii	riuitian	d Coal	25355	K Federal ORSE	SF078	3502	
Unit LetterG	: 1580	_ Feet From The	North L	ne and 14	50	est From The	East		
Section 11 Towns	hip 29N	Range 8W		MPM,		San Jua		Line	
III DESIGNATION OF TO A	NCDODZED OF 6					Dan Jua		County	
III. DESIGNATION OF TRA  Name of Authorized Transporter of Oil	Or (`oada		URAL GAS	w address to w	hich approve	d approach is d		· · · · · · · · · · · · · · · · · · ·	
Gary-Williams Energy	P. O. Box 159, Bloomfield, NM 87413					<i>()</i>			
Name of Authorized Transporter of Casi El Paso Natural Gas	nghead Gas Company	or Dry Gas X	Address (Gi	w address to wi Box 499(	ich annenue	Learn of this f			
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. R	c is gas actual	ly connected?	When	?			
If this production is commingled with that		129N   8W	No			Appro	x 4/9/93	}	
IV. COMPLETION DATA	281	3 / 72	skitek ouet enu	ber:					
Designate Type of Completion	Oil Well	Gua Well	New Well	Workover	Deepen	Plug Back	Sama Bashu	D. (f D. st.	
Date Spudded		X	X	i		i ing sace j	Mille Ket A )	Diff Res'v	
10-05-92	Date Compl. Ready to		Total Depth	<del> </del>	<del></del>	P.B.T.D.			
	3-29-93			3217'			3092'		
Elevations (DF, RKB, RT, GR, stc.) 6311 GR	Name of Producing Fo Fruitland	.	Top Oil/Gas Pay 2853			Tubing Depth			
3020'-3024', 2960'-2975', 2940-'			2960'.			3040 Depth Casing Shoe			
			-2859'			3215'			
HOLE SIZE	CASING A TI	CASING AND	CEMENTING RECORD			T			
12 1/4"	CASING & TUBING SIZE 8 5/8"		<del></del>	DEPTH SET		SACKS CEMENT			
7 7/8"		5 1/2"-		266'		200 sx Class B w/2% CaCl			
	3 1/2		<del></del>	3212'		225 sx PSL w/6% gel +			
	2 3/8	20/01			100 sxClass B w/1% CF-				
. TEST DATA AND REQUES	T FOR ALLOWA	BLE		3040'		14 & 0.4	% Thrifty	y Lite	
IL WELL (Test must be after re	ecovery of total volume (	of load oil and mus	. h	4					
ute First New Oil Rua To Tank	Date of Test	Producing Man	t be equal to or exceed top allowable for this depth or be for full 24 hours						
			Producing Method (Flow, pump, gas lift, etc.			AU FRESA E			
ength of Test	Tubing Pressure		Casing Pressure				-		
				•	[	Size	2 199	3	
uzal Prod. During Test Oil - Bbls.			Water - Bbia.			Ga-MCE CON 014			
AS WELL SI - WO PL Connection/IP Test - wi						Ole 4			
ciual Prod. Test - MCF/D	Length of Test	rest - w	ill submi	t when to	ested.		D31. 3		
	congui or Test	•	Bbls. Condensa	LE/MMCF	1	Gravity of Con	lensace .		
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in	Casing Pressure (Shut-in)							
• .	180 psi			180 psi			Choke Size 1/4"		
L OPERATOR CERTIFICATE OF COMPLIANCE			100						
I neredy certify that the rules and regular	OIL CONSEDVATION DIVIDION								
DIVISION HAVE DOCK COMPLIED WITH AND IN	OIL CONSERVATION DIVISION								
is true and complete to the best of my kn	Data Assessed APR 0 9 1003								
	Date ApprovedAFR U 9 AGR								
- Earning									
Carrie A. Baze	By_ But ? Chang								
Printed Name			SUPERVISOR DISTRICT #3						
3/31/93	Title								
Dute	Telepho	94-6107 Dae No.		<del></del>		···	•	<del></del>	
	·	ľ	1						

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
- 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.