

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

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

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

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

Operator SG Interests I, Ltd.	Well API No. 30-045-29956
Address P. O. Box 421, Blanco, NM 87412-0421	
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 Santa Rosa 17	Well No. 2	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal, Indian	Lease No. SF076337
Location Unit Letter L : 1775 Feet From The South Line and 1290 Feet From The West Line Section 17 Township 29N Range 9W, NMPM, San Juan 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)
None	
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 <i>SG Interests I, Ltd.</i>	P. O. Box 4990, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rgn.   Is gas actually connected?   When?
	L   17   29N   9W

If this production is commingled with that from any other leases 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 7-07-90	Date Compl. Ready to Prod. 2-06-92	Total Depth 2190'		P.B.T.D.		2145'		
Elevations (DF, RKB, RT, GR, etc.) 5648' GL, 5658' RKB	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 1941'		Tubing Depth 2006'				
Performances 1941'-1954', 1976'-1986', 2074'-2092'						Depth Casing Shoe 2183'		

**TUBING, CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	125'	170 sx Class B w/2% CaCl
7 7/8"	4 1/2"	2184'	25 sx Class B + 225 sx
			Class B w/2% Econolite +
	2 3/8"	2006'	350 sx 50/50 Poz Mix

**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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
			FEB 20 1992

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**GAS WELL**

Actual Prod. Test - MCF/D 430	Length of Test 24 Hrs	Bbls. Condensate/MMCF 1	Gravity of Condensate NA
Testing Method (pilot, back pr.) Choke Nipple	Tubing Pressure (Shut-in) 680 psi	Casing Pressure (Shut-in) 680 psi	Choke Size 1/4"

**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 Carrie A. Baze  
Printed Name Carrie A. Baze Agent  
Date 2-14-92 Telephone No. (915) 694-6107

**OIL CONSERVATION DIVISION**

Date Approved MAR 12 1992  
By Original Signed by FRANK T. CHAVEZ  
Title SUPERVISOR DISTRICT # 3

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.