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Appropriate District Office
DISTRICT!
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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I		O TRA	NSP	ORT OI	<u>L AND NA</u>	<u>TURAL G.</u>					
Openior SG Interests I, Ltd.							Well	Well API No. 30-045-27977			
Address P. O. Box 421	Blanco,	NIM 8	7512	-0421							
P. O. Box 421,	branco,	, INFI U	7712	-0421		ver (Please expl	l=:=1	 			
Reason(s) for Filing (Check proper box)		~	~	6		ier (rieuse expi	aur)				
New Well		Change in	-								
Recompletion \Box	Oil	딘	Dry Ga								
Change in Operator	Casinghead	Gas [_]	Conde	sale X	20						
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	ANDIEA	CE.									
Lease Name		 	I V:-A	of Lease No.							
· · · · · · · · · · · · · · · · · · ·								Federal graftesk SF076337			
Santa Rosa 17			Ь	asın r	ruitiano	urtrand Coar			3F0/033/		
Location Unit Letter H	: 1815 Feet From The North Line and 835 Feet From The East								•		
	_ :						Feet From The Line				
Section 17 Townshi	p 29N		Range	9W	,N	MPM,		San Jua	<u>n</u>	County	
III. DESIGNATION OF TRAN	SPORTER	OF OI	LAN	D NATU							
Name of Authorized Transporter of Oil	(or Condens	والدو	KX		e address to wi				M)	
Gary-Williams Energy	P. O. Box 159, Bloomfield, NM 87413										
Name of Authorized Transporter of Casing	or Dry	Gas [XX]	Address (Gir	(Give address to which approved copy of this form is to be sent)				eni)			
SG Interests I, Ltd.								, NM 87412-0421			
If well produces oil or liquids,	Unit S	Sec.	Twp. Rge.		Is gas actually connected?		Whea	When ?			
give location of tanks.	H	17	29N	1 9W	Ye	s	Ì	4/01	/92		
If this production is commingled with that	from any other	r lease or p	ool, giv	e comming	ing order num	ber:					
IV. COMPLETION DATA	•	•	. •		•			·····			
Designation of Completion	(10)	Oil Well		ias Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Resiv	
Designate Type of Completion					1	I	L			1	
Date Spudded	Date Compi.	mpl. Ready to Prod.			Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, atc.) Name of Producing			rmation		Top Oil/Ges Pay			Tubing Depth			
Perforations					<u></u>						
rendands								Deput Casing	Spoe		
TUBING, CASING AND					CEMENTI	NG RECOR	D				
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
							·				
				**						·	
V. TEST DATA AND REQUES	T FOR AL	LLOWA	BLE		ł	· · · <u>-</u> , <u>-</u>					
OIL WELL (Test must be after r	ecovery of total	el volume o	of load o	il and must	be equal to or	exceed top allo	mable for this	depik og be f	er full 24 how	ريان لده	
Date First New Oil Rue To Tank	Date of Test		ž			shod (Flow, pu				I I E	
Length of Test Tubing Pressure					Casing Pressure Choks Size						
						Casing Freezine			APRIT.1992		
Actual Prod. During Test	Oil - Bbls.							GE MOIL CON. DIV.			
GAS WELL					L			<u> </u>	DIST.		
AS WELLE Stual Prod. Test - MCF/D Length of Test					Bbis. Conden	me/MMCF		Gravity of Condensate			
sting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size			
	<u> </u>				ــــــــــــــــــــــــــــــــــــــ			<u> </u>		·	
VI. OPERATOR CERTIFIC	ATE OF (COMPI	LIAN	CE	ر اا						
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					(OIL CONSERVATION DIVISION					
					ADD 1 7/1000						
is true and complete to the best of my is	CDOWINGE and	belief.			Date	Approved	d	APR 17	1992		
]	• •			1		
Signature					By Bin Chang						
Carrie A. B	aze		Agen		_		SUPER	MISOR DI	STAICT	#3	
4/14/92	(915)) 694-		' 	Title					- -	
Date		Telep	hoae No	D.							

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.