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State Of INCM INTEXACO 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

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

Santa Fe, New Mexico 87504-2088

| 1000 Min Plasma Ivani Amerika Ivani A. Min  |   |                     |                     |                                       |   | AUTHOR<br>TURAL G               |             |  |   |  |  |
|---|---|---------------------|---------------------|---------------------------------------|---|---------------------------------|-------------|--|---|--|--|
| I.<br>Operator  |   | 10 182              | INSPU               | ni Oil                                | - AND IV  | TUNALU                          |             | API No.                                |   |  |  |
| SG Interests I,   | Ltd.  |                     |                     |                                       |   |                                 |             |  | 5-28728   |  |  |
| P. O. Box 421,  | Blanco  | , NM 87             | 7412-0              | 421                                   |   |                                 |             | •                                      |   |  |  |
| Reason(s) for Filing (Check proper box)   |   |                     |                     | · · · · · · · · · · · · · · · · · · · | a   | her (Please exp                 | (منط        | )EC                                    | FIV   |  |  |
| New Well  | 0.1   | Change in           | •                   | er of:                                |   |                                 | in          | ا الله الله                            |   |  |  |
| Recompletion  | Oil<br>Cacinahar                              | ad Cas 🗌            | Dry Gas<br>Condensa |                                       |   |                                 | U\          | À                                      | 1 1993  | 6.5  |  |
| Change in Operator  | Canalica                                      | W 044               | Colocus             |                                       |   |                                 |             | JANI                                   | 1 1993  | AR 18  |  |
| and address of previous operator  |   |                     |                     |                                       |   |                                 | 2.4         | OILC                                   | <del>DN. D</del>                                      | <del>17.                                      </del> |  |
| II. DESCRIPTION OF WELL   | AND LE  |                     | D (1)               |                                       | T   |                                 | T Pin A     | of Lease                               | ST. 3   | esse No.   |  |
| Lease Name<br>Federal 29-9-   |   |                     |                     |                                       |   |                                 |             |  | Federal modernix SF80000                              |  |  |
| Location  |   | _                   | a t                 |                                       | _   |                                 |             |  |   | •  |  |
| Unit LetterL  | _:_154  | 5                   | . Feet From         | n The _S                              | outh L  | ne and89                        | <u>'0</u> F | et From The                            | North   | Line   |  |
| Section 25 Townshi  | p 291   | N                   | Range               | 98h                                   | , N   | IMPM,                           |             | San Jua                                | n   | County   |  |
| III. DESIGNATION OF TRAN  | SPORTE  | E OF O              | II. AND             | NATTI                                 | RAL CAS   |                                 |             |  |   |  |  |
| Name of Authorized Transporter of Oil   |   | we address to w     | hich approved       | copy of this                          | form is to be s   | evi)                            |             |  |   |  |  |
| Gary-Williams Energy Corportaion  |   |                     |                     |                                       | P. O. Nox 159, Bloomfield, NM 87413   |                                 |             |  |   |  |  |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas X El Paso Natural Gas Company   |   |                     |                     |                                       | Address (Give address to which approved copy of this form is to be sent) P. O. Box 4990, farmington, NM 87499 |                                 |             |  |   |  |  |
| If well produces oil or liquids,  | Unit  | Unit Sec. Twp. Rge. |                     |                                       |   | Is gas actually connected? When |             |  | 7   |  |  |
| give location of tanks.   | ↓ L   | 25                  | 29N <sub>1</sub>    |                                       | No  |                                 |             | pprox 1                                | -15-93  |  |  |
| If this production is commingled with that IV. COMPLETION DATA  | from any ou                                   | ner lease or        | pool, give          | comming                               | ing order nun   | mber:                           |             | ·                                      | <del></del>   |  |  |
| Designate Type of Completion  | - (X)   | Oil Well            | Ga                  | 4 Weil                                | New Well  | Workover                        | Deepen      | Plug Back                              | Same Res'v  | Diff Res'v   |  |
| Date Spudded 10-24-92   | Date Compl. Ready to Prod.<br>12-11-92        |                     |                     | Total Depth                           | 2540 <b>'</b>   | 1                               | P.B.T.D.    | 2422                                   | 2390  |  |  |
| Elevations (DF, RKB, RT, GR, etc.)  | Name of Producing Formation                   |                     |                     |                                       | Top Oil/Gas   | Top Oil/Gas Pay                 |             |  | ruh   | 3(2) U   |  |
| 5915' GL & 5928' KB Fruitland Coal  |   |                     |                     |                                       |   | 2170'                           |             |  | 2308'   |  |  |
| Perforations 2278'-2 2170'-2176', 2183'-2185', 2255'-2270', 2302'-2   |   |                     |                     |                                       |   |                                 |             |  |   | .481   |  |
|   | TUBING, CASING AND                            |                     |                     |                                       | <u> </u>  |                                 |             | ······································ | <del> </del>  |  |  |
| HOLE SIZE   | CASING & TUBING SIZE                          |                     |                     |                                       | DEPTH SET   |                                 |             |  | SACKS CEM   |  |  |
| 12 1/4"   | <del> </del>                                  | 8 5/8"              |                     |                                       | 264.46'<br>2531.48'   |                                 |             |  | 200 sx Class B w/2% CaCl<br>400 sx 65/35 Pox w/6% gel |  |  |
| 7 7/8"  | 5 1/2"  |                     |                     | · · · · · · · · · · · · · · · · · · · |   |                                 |             | 100 sx Class B w/1% CF-14              |   |  |  |
|   | 2 3/8"  |                     |                     |                                       | 2308'   |                                 |             | CIASS D V                              | V/ 1% OI - 14   |  |  |
| V. TEST DATA AND REQUES   |   | ALLOWA              | ABLE                |                                       | <u>.                                    </u>  |                                 |             | <u> </u>                               |   |  |  |
| OIL WELL (Test must be after r  | Date of Te                                    |                     | of load oil         | and must                              |   |                                 |             |  | for full 24 hou                                       | urs.)  |  |
| Date First New Oil Run To Tank  | Producing Method (Flow, pump, gas lift, etc.) |                     |                     |                                       |   |                                 |             |  |   |  |  |
| Length of Test  | Tubing Pressure                               |                     |                     | Casing Pressure                       |   |                                 | Choke Size  |  |   |  |  |
| Actual Prod. During Test  | Oil - Bbis.                                   |                     |                     | Water - Bbls.                         |   |                                 | Gas- MCF    |  |   |  |  |
|   |   |                     | ,                   |                                       |   |                                 | į (         |  |   | ·  |  |
| GAS WELL SI - Waiti   | ng on   | PL Con              | nectio              | n/Ini                                 |   |                                 | Test -      | Will su                                | bmit whe  | n tested.  |  |
| Actual Prod. Test - MCF/D   | Length of                                     | Test                |                     |                                       | Bbis. Coade   | maie/MMCF                       | · · ·       | Gravity of                             | Condensate  |  |  |
|   | Tubing Pressure (Shut-in)                     |                     |                     | C. Y. B.                              | Casing Pressure (Shut-in)   |                                 |             |  | .,  |  |  |
| Testing Method (pilot, back pr.)  | 325 psi                                       |                     |                     |                                       |   | 450 psi                         |             |  | 1/4"  |  |  |
| VI OPERATOR CERTIFIC  | <u> </u>                                      |                     | T TANK              | ٠,                                    | \   | 0 psr                           |             | 1                                      | 1/7   |  |  |
| VI. OPERATOR CERTIFIC   |   |                     |                     | Æ                                     |   | OIL CON                         | NSFRV.      | ATION                                  | DIVISIO   | NC   |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above |   |                     |                     |                                       |   | <b>0.4 00.</b>                  | 104         |  |   |  |  |
| is true and complete to the best of my knowledge and belief.  |   |                     |                     |                                       | Date Approved JAN 1 9 1993  |                                 |             |  |   |  |  |
| •   |   |                     |                     |                                       | Dale  | a whhicae                       |             | <del></del>                            | · <u>·······</u>                                      |  |  |
| Signature Commission A. Barre   |   |                     |                     |                                       | By 31) du   |                                 |             |  |   |  |  |
| Printed Name Title  |   |                     |                     |                                       |   |                                 | SUPERV      | ISOR DI                                | STRICT  | <b>#</b> 3   |  |
| 01/08/93  | <del>*</del>                                  | (915)               | 694-6               |                                       | Title   |                                 | <del></del> | <del> </del>                           |   | <del></del>  |  |
| Dute  |   | Tele                | phone No.           |                                       | 11  |                                 |             |  |   |  |  |

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.