

OIL CONSERVATION DIVISION

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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. 30-045-28743
Address P. O. Box 421, Blanco, NM 87412-0421	
Reason(s) for Filing (Check proper box) 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 Federal 29-10-1	Well No. 2	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease Federal	Lease No. SF077092A
Location Unit Letter L : 1395 Feet From The South Line and 1010 Feet From The West Line Section 1 Township 29N Range 10W NMPM San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Gary-Williams Energy Corporation	or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Bloomfield, NM 87413				
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Company	or Dry Gas <input checked="" type="checkbox"/>	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, give location of tanks.	Unit L	Sec. 1	Twp. 29N	Rge. 10W	Is gas actually connected? Yes	When? 12-31-92

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 10-31-92	Date Compl. Ready to Prod. 12-07-92	Total Depth 2521'	P.B.T.D. 2470'					
Elevations (DF, RKB, RT, GR, etc.) 5901' GR & 5912' KB	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2219'	Tubing Depth 2409'					
Perforations 2354'-2380', 2296'-2310', 2268'-2284', 2246'-2248', & 2219'-2221'	Depth Casing Shoe 2520.7'							

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	264.75'	200 sx Class B w/2% CaCl
7 7/8"	5 1/2"	2516.93'	445 sx 65/35 Poz w/6% gel
			+ 100 sx Class B w/1% CF-14
	2 3/8"	2408.79'	

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

GAS WELL SI - WO Initial Potential/First Delivery. Will submit when well is tested.

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 300 psi	Casing Pressure (Shut-in) 450 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
Carrie A. Baze Agent
Printed Name 01/07/93 (915) 694-6107
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JAN 19 1993

By Burt S. [Signature]
SUPERVISOR DISTRICT #3
Title

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.