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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

I. Operator SG Interests I, Ltd.		Well API No. 30-045-28843
Address P. O. Box 421, Blanco, NM 87412-0421		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

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OIL CON. DIV.
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal 28-8-29	Well No. 2	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State Federal and State	Lease No. NM-03549
Location Unit Letter K : 1450 Feet From The South Line and 2050 Feet From The West Line Section 29 Township 28N Range 8W, 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 checked="" type="checkbox"/> Gary-Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 421, Bloomfield, NM 87413	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> 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, give location of tanks. Unit K Sec. 29 Twp. 28N Rge. 8W	Is gas actually connected? No	When? Approx 4/15/93

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 12-10-92	Date Compl. Ready to Prod. 03-10-93		Total Depth 2463'		P.B.T.D. 2355'			
Elevations (DF, RKB, RT, GR, etc.) 5955' GL, 5968' KB	Name of Producing Formation Fruitland Coal		Top Oil/Gas Pay 2103'		Tubing Depth 2247'			
Perforations 2193'-2205', 2187'-2191', 2163'-2168', 2134'-2151', & 2103'-2108'					Depth Casing Shoes 2455'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		270'		225 sx Class B w/2% CaCl			
7 7/8"	5 1/2"		2456'		325 sx PSL w/6% gel +			
	2 3/8"		2247'		100 sx Class B w/1% CF-			
					14 & 0.4% Thrifty Lite			

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 PL Connection/Initial Potential - will submit when tested.

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 260 psi	Casing Pressure (Shut-in) 300 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 Agent
Printed Name Carrie A. Baze Title
Date 3/26/93 Telephone No. (915) 694-6107

OIL CONSERVATION DIVISION

Date Approved APR 5 1993
By Original Signed by CHARLES JOHNSON
Title DEPUTY OIL & GAS INSPECTOR, DIST. 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.