

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
SAGE ENERGY COMPANY

Address  
P. O. Drawer 3068, Midland, Texas 79702

Reason(s) for filing (Check proper box)  
☒ New Well  
☐ Recompletion  
☐ Change in Ownership  
 Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
 Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "30" State	Well No. 1	Pool Name, including Formation Tres Papalotes (West) Penn	Kind of Lease State, Federal or Fee	Lease No. V8-26
Location Unit Letter <u>I</u> : <u>800</u> Feet From The <u>East</u> Line and <u>1980'</u> Feet From The <u>South</u> Line of Section <u>30</u> Township <u>14-S</u> Range <u>34-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation <u>Permian (EN. 9 / 1 / 87)</u>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, Oklahoma 74102
If well produces oil or liquids, give location of tanks. Unit <u>I</u> Sec. <u>30</u> Twp. <u>14-S</u> Rge. <u>34-E</u>	Is gas actually connected? <u>yes</u> When <u>3-17-87</u>

If this production is commingled with that from any other lease or pool, give commingling order number: No

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Frances Holzgraf  
(Signature)  
Frances Holzgraf, Production Clerk  
(Title)  
March 18, 1987  
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 18 1987, 19  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
TITLE

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiple completed wells.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'y.	Diff. Rest'y.
Date Spudded 1-29-87	Date Compl. Ready to Prod. 3-17-87	Total Depth 10,540		P.B.T.D. 10,518					
Elevations (DF, RKB, RT, GR, etc.) 4146' GL	Name of Producing Formation Pennsylvanian	Top Oil/Gas Pay 10,392'		Tubing Depth 10,416					
Perforations 10,392, 93, 94, 95, 96, 97, 98, 99, 10,400, 01,02,03, 04, 05, 06,							Depth Casing Shoe 10,540'		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2 "		13 3/8"		42.93' 422 47		450 sxs Class "C"			
11		8 5/8"		4481.85'		2000 sxs Halliburton Lt.			
7 7/8		5 1/2 "		10,561.08'		380 sxs Class "H"			

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks 3-14-87	Date of Test 3-17-87	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure NA	Casing Pressure NA	Choke Size none
Actual Prod. During Test 71	Oil - Bbls. 31	Water - Bbls. 40	Gas - MCF 15.5

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF 2.11	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size