

PADILLA & SNYDER

ATTORNEYS AT LAW
200 W. MARCY, SUITE 216
P.O. BOX 2523
SANTA FE, NEW MEXICO 87504-2523
FACSIMILE: (505) 988-7592
TELEPHONE: (505) 988-7577

September 10, 1992

CERTIFIED MAIL

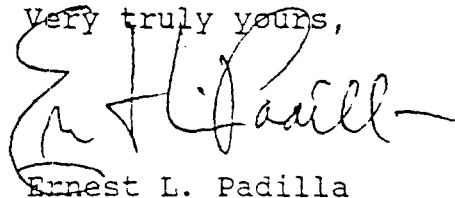
TO: OFFSET OPERATORS (See attached list)
RE: Application of Siete Oil & Gas
Corporation for a GOR Limitation
Determination, Eddy County, New Mexico

EXHIBIT NO.: /
OPERATOR: SIETE OIL & GAS
DOCKET NO.: 10562
DATE: OCTOBER 1, 1992

Pursuant to the Rules and Regulations of the General Rules of the Oil Conservation Division of New Mexico, notice is given of the above-referenced application. You may protest the enclosed application by appearing at the hearing of this application which will be heard on October 1, 1992 beginning at the hour of 8:15 a.m., at the offices of the Oil Conservation Division, State Land Office Building, 310 Old Santa Fe Trail, Santa Fe, New Mexico.

Should you desire to waive objection to the application, you may sign the enclosed waiver form and return it to the undersigned counsel for Siete Oil & Gas Corporation.

Very truly yours,


Ernest L. Padilla

ELP:pmc
Enclosures as stated

OFFSET OPERATORS - PARKWAY

✓ Meridian Oil, Inc.
P. O. Box 51810
Midland, Texas 79710-1810
Attn: Mo Gaddis

Ray Westall
P. O. Box 4
Loco Hills, NM 88255

UMC Petroleum
1201 Louisiana, Suite 1400
Houston, TX 77002
Attn: Brian Baer

✓ Strata
700 Petroleum Building
Roswell, NM 88201
Attn: George L. Scott

✓ Presidio Oil Company
P. O. Box 6525
Englewood, Colorado 80155-6525
Attn: Marshall Munsefll, Land Manager

✓ Santa Fe Energy
550 W. Texas Ave., Suite 1330
Midland, Texas 79701
Attn: Randy Offenberger

Chevron
P. O. Box 1150
Midland, Texas 79702
Attn: Larry La Fleur

Conoco
10 Desta Drive, Suite 100 W.
Midland, Texas 79705-4500
Attn: Peggy Sutko

✓ Eastland Oil Company, Inc.
Drawer 3488
Midland, Texas 79702
Attn: Travis Reed

Fortson Oil Company
301 Commerce St., Suite 3301
Fort Worth, Texas 76102
Attn: Jack Gevecker

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

Article Addressed to:

4. Article Number

176 152 892

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Santa Fe Energy
550 W. Superline, #1330
Midland, TX 79701

4. Article Number

176 152 891

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

9-1-12

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Chevron
P.O. Box 1150
Midland, TX 79702

4. Article Number

176 152 890

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

1-1-92

8. Addressee's Address (ONLY if requested and fee paid)

1992

RECEIVED

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>1702 Tinslem 201 Louisiana, Ste 1400 Houston, TX 77002</i>	4. Article Number <i>P176 152 894</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature - Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid) SEP 14 1992
6. Signature - Agent <i>X</i>	
7. Date of Delivery <i>9-14-92</i>	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Jackson Oil Co. 301 Commerce St. Ste 3301 Fort Worth, TX 76102</i>	4. Article Number <i>P176 152 887</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature - Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent <i>X</i>	
7. Date of Delivery	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Eastland Oil Co. Drawer 3488 Midland, TX 79702</i>	4. Article Number <i>P176 152 888</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature - Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent <i>X</i>	
7. Date of Delivery <i>9-14-92</i>	

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Kerr, Westall P.O. Box 4 Lone Hills, 77185-255</i>	4. Article Number <i>P176 152 895</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <i>X</i>	
7. Date of Delivery	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Strata 700 Petroleum Bldg. Rosenell, 77777 85261</i>	4. Article Number <i>P176 152 893</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <i>X Janice Starnes</i>	
7. Date of Delivery <i>9-14-92</i>	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Meridian Ciltone P.O. Box 51810 Midland, TX 79710-1810</i>	4. Article Number <i>P176 152 896</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <i>X [Signature]</i>	
7. Date of Delivery <i>9-14-92</i>	

SENDER: Complete Items 1 and 2 when additional services are desired, and complete Items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

Conso
10 Extra Sp. #100 W.
Midland, TX 79705

4. Article Number

P176152889

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and **DATE DELIVERED**.

5. Signature — Address

X

6. Signature — Agent

X

A. Arzales

7. Date of Delivery

4-12-92

8. Addressee's Address (ONLY if
requested and fee paid)

P 176 152 890

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Cherwon
Street and No.	Box 1150
State and ZIP Code	Medford, TX 79702
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$3.52
Postmark or Date	9-10-92

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 891

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	S.F. Cherry
Street and No.	5380 Supercenter #330
State and ZIP Code	Medford, TX 79701
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$2.50
Postmark or Date	9-10-92

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 892

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Dee di bit
Street and No.	Box 6525
State and ZIP Code	Medford, TX 79702
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$2.52
Postmark or Date	9-10-92

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 893

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Strata
Street and No.	700 Petroleum Bldg
State and ZIP Code	Medford, TX 79701
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$2.52
Postmark or Date	9-10-92

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 887

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Fortson Villa
Street and No.	361 Cameron
P.O. State and ZIP Code	LA 7002
Postage	\$52
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$52
Postmark or Date	9-10-92

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 888

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Erastus Oil
Street and No.	3485
P.O. State and ZIP Code	TX 79702
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$52
Postmark or Date	9-10-92

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 889

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Conoco
Street and No.	2801 11th
P.O. State and ZIP Code	TX 79102
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$52
Postmark or Date	9-10-92

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 896

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Veridian Dr	
Street and No.	Box 51810	
City, State and ZIP Code	Dallas TX 75210	
Postage	\$	53
Certified Fee		100
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to whom and Date Delivered		100
Return receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees	\$	252
Postmark or Date	9-10-92	

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 895

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Ray McCall	
Street and No.	Box 4	
City, State and ZIP Code	Dallas TX 75210	
Postage	\$	32
Certified Fee		100
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to whom and Date Delivered		100
Return receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees	\$	252
Postmark or Date	9-10-92	

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

P 176 152 894

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	M.C. Peterson	
Street and No.	1201 Delaware #1400	
City, State and ZIP Code	Dallas TX 75202	
Postage	\$	
Certified Fee		
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to whom and Date Delivered		
Return receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees	\$	252
Postmark or Date	9-10-92	

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

WAIVER

UMC Petroleum hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 50000 to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

UMC Petroleum

By: AM [Signature]

Title: Vice President, Operations

Date: September 28, 1992

WAIVER

Strata hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 5000~~0~~⁰⁰ to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

Strata

By: Mark E. Murphy

Title: President

Date: 9/17/92

WAIVER

Meridian Oil, Inc. hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 5000 to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

Meridian Oil, Inc.

By:

Title:

Date:

David L. White
Regulatory Compliance Rep
9/16/92

WAIVER

Eastland Oil Company, Inc. hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 50000/ to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

Eastland Oil Company, Inc.

By: Lewis Reed

Title: Production Superintendent

Date: 9-15-1992

MERIDIAN OIL

September 30, 1992

Michael E. Stogner
Hearing Examiner
Oil Conservation Division
State Land Office Building
Santa Fe, New Mexico 87501

Re: Oil Conservation Division
Case No. 10562
Application of Sieta Oil & Gas
GOR Exception

Dear Mr. Stogner:

Meridian Oil Inc. supports the application of Siete Oil & Gas Corporation in the above referenced case. Meridian operates oil wells in the Parkway Delaware Pool and believes that the reservoir characteristics of the pool suggest that higher GOR rates will provide optimum producing rates. We are of the opinion that higher GOR rates will not result in waste.

Sincerely,
Meridian Oil Inc.

Dr. Fisher

D. W. Rader
Engineering Manager

MPG:nak
xc: correspondence file

WAIVER

Santa Fe Energy hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 5000/ to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

Santa Fe Energy

By: Randy M. O'Brien

Title: VP Engr.

Date: 9/25/02

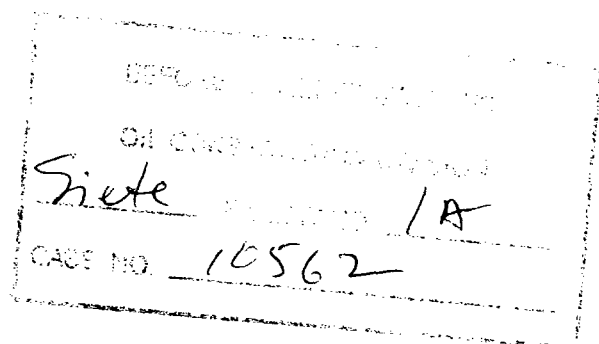
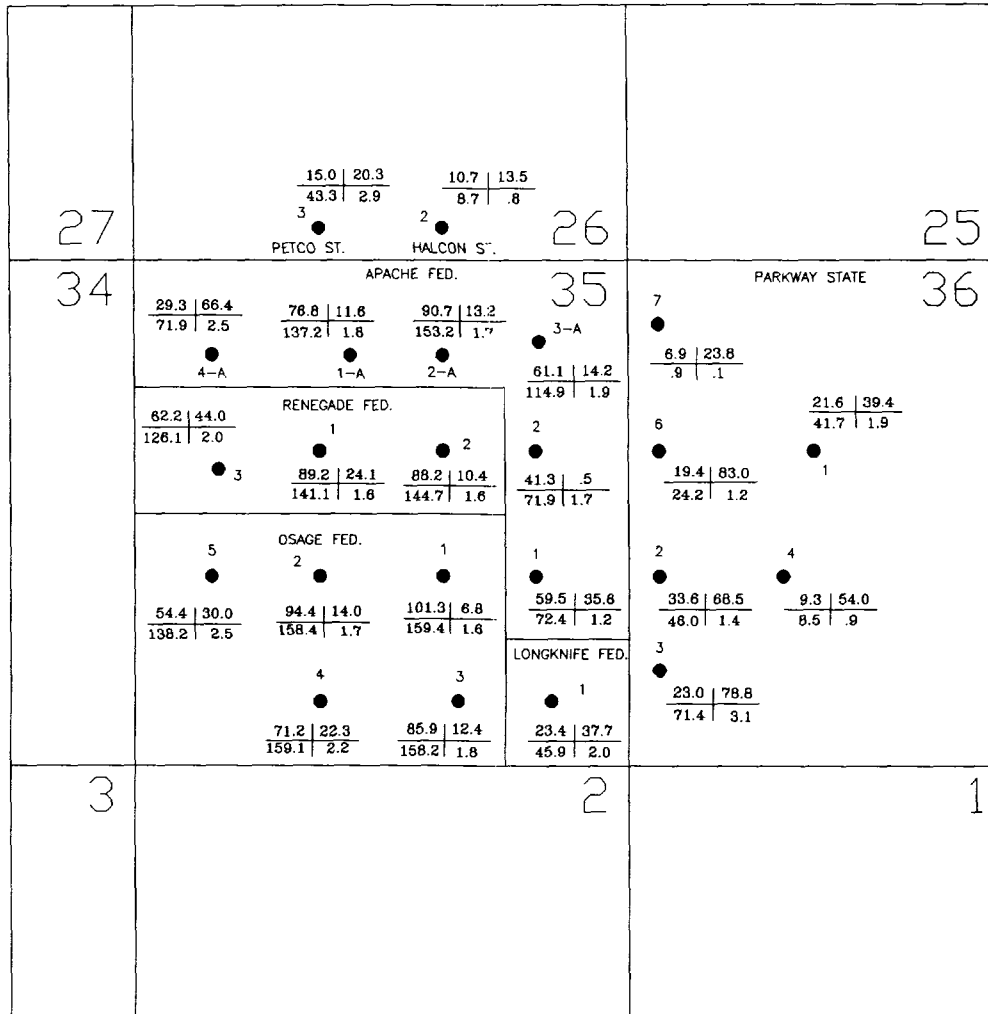


EXHIBIT NO.: 2OPERATOR: SIETE OIL & GAS CORP.DOCKET NO.: 10562DATE: OCTOBER 1, 1992*Township 19 South, Range 29 East**Township 20 South, Range 29 East**EDDY COUNTY, NEW MEXICO**PARKWAY FIELD*

FIELD CUMS

Scale 1" = 2000'

MBO = 1186
 MBW = 793
 MMCF = 2574
 GOR = 2.2

12/91 CUMS

MBO	MBW
MMCF	GOR

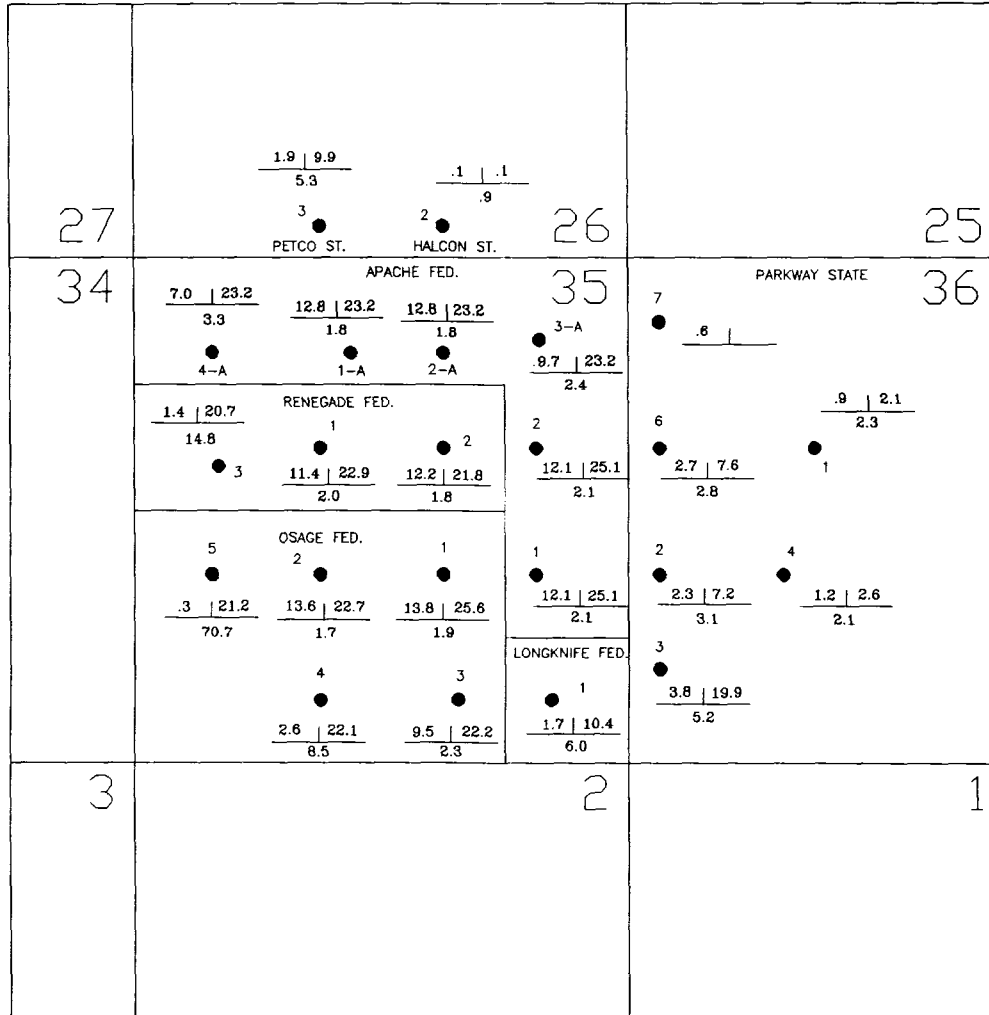
EXHIBIT NO.: 4

OPERATOR: SIETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

Township 19 South, Range 29 East



Township 20 South, Range 29 East

EDDY COUNTY, NEW MEXICO

PARKWAY FIELD

FIELD 1992 PROD.

MBO = 146.6
MMCF = 382.1
GOR = 2.6

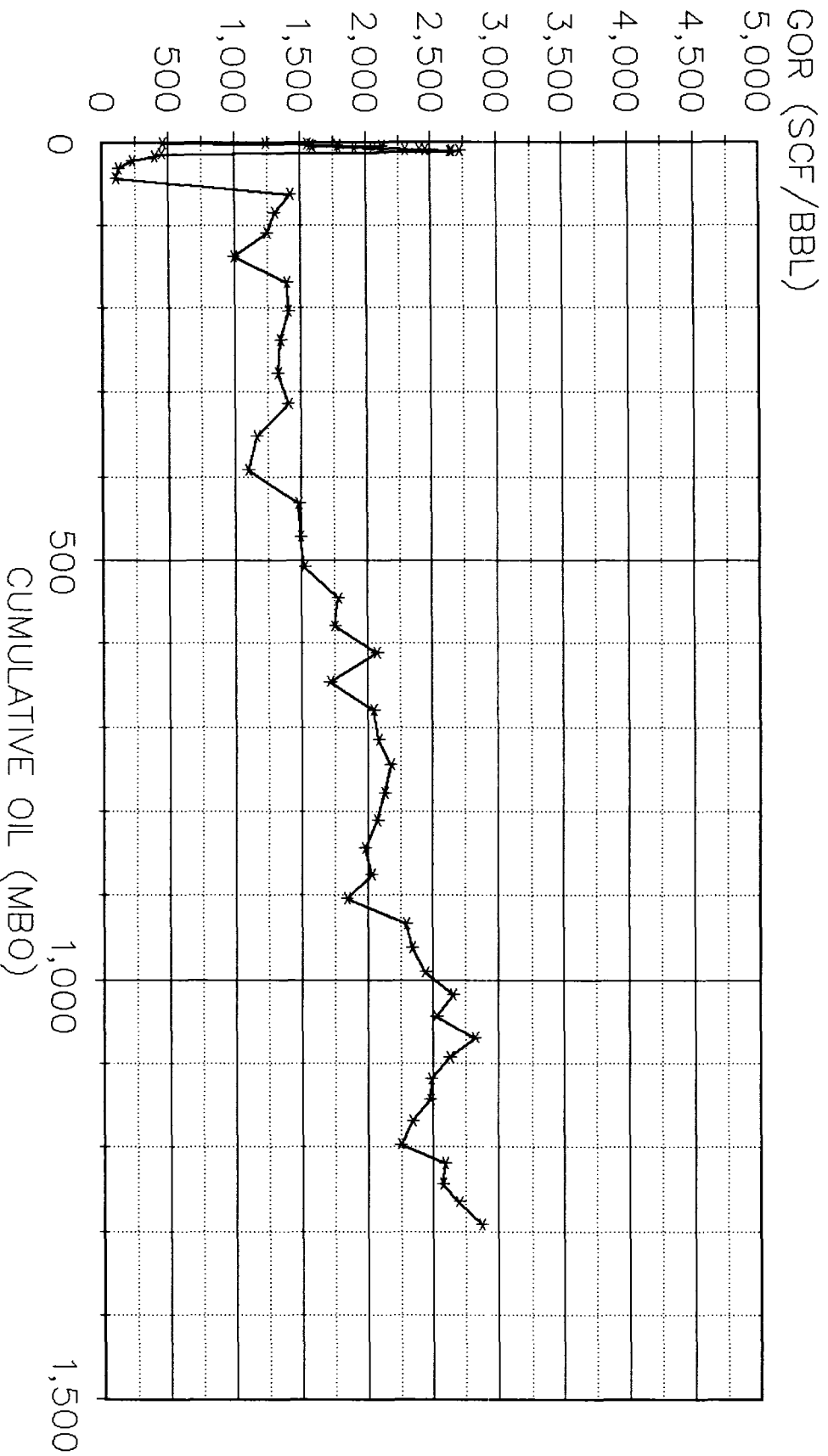
1992 PROD.

MBO | MMCF
GOR

Scale 1" = 2000'

PARKWAY DELAWARE

GOR vs CUM OIL



DATA THRU 5/92

EXHIBIT NO.: 5

OPERATOR: SIETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

EXHIBIT NO.: 6

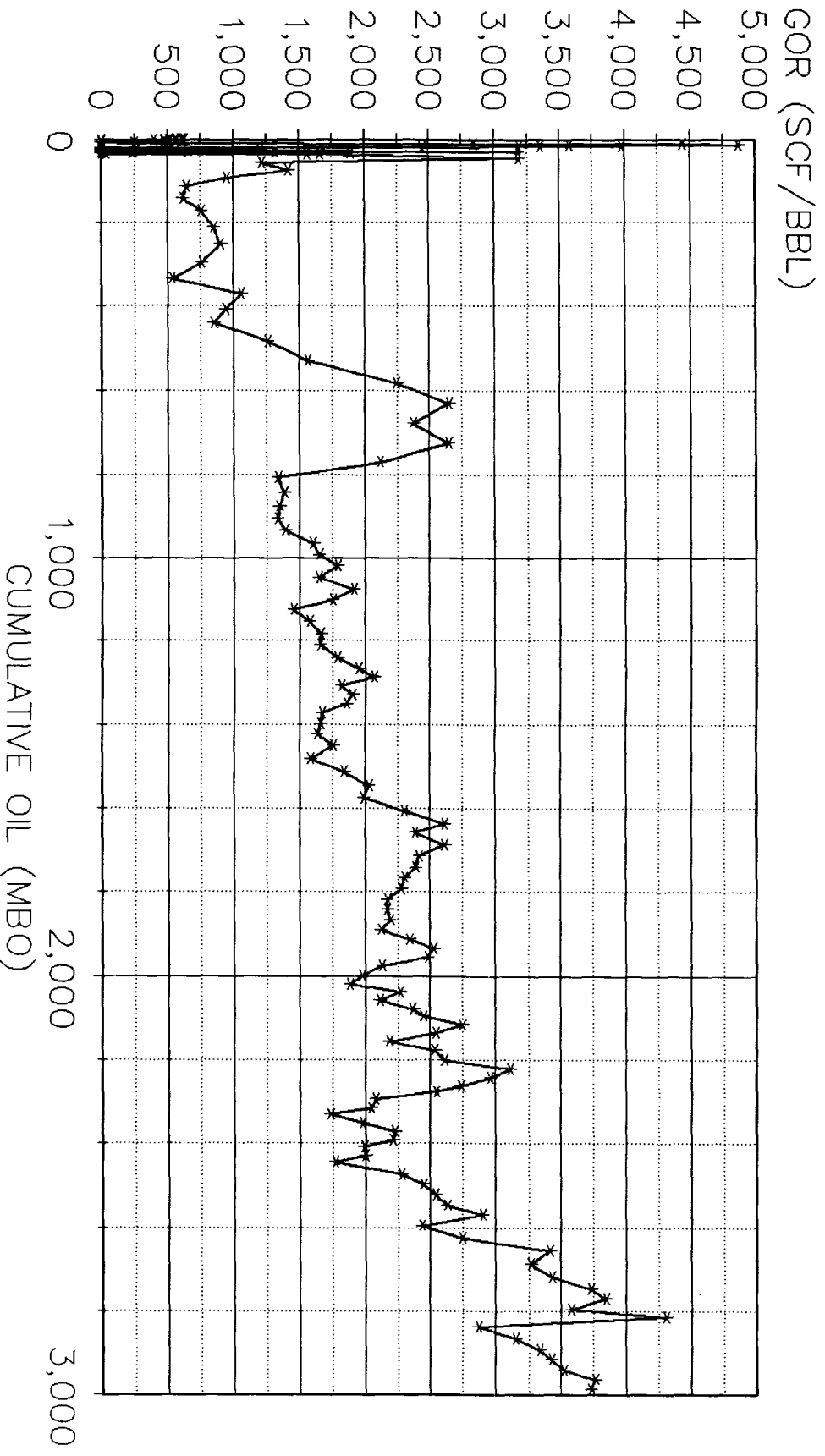
OPERATOR: SIETE OIL & GAS

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

AVALON DELAWARE

GOR vs CUM OIL



**RESERVOIR DATA SHEET
PARKWAY (DELAWARE) FIELD
EDDY COUNTY, NEW MEXICO**

Reservoir Drive Mechanism:	Solution Gas Drive
Average Depth:	-875 feet
Initial Reservoir Pressure at -875 feet:	1,838 psia
Reservoir Temperature:	110° F
Current Reservoir Pressure at -875 feet:**	1,241 psia
Bulk Volume:	45,122 Acre-Feet
Initial Oil FVF:	1.2213 RB/STB
Initial Solution GOR:**	483 SCF/STB
Current Solution GOR:	370 SCF/STB
Average Porosity:	18.1%
Average Water Saturation:	43.0%
Estimated Oil-Water Contact:	-1135 feet

**As of September 1991

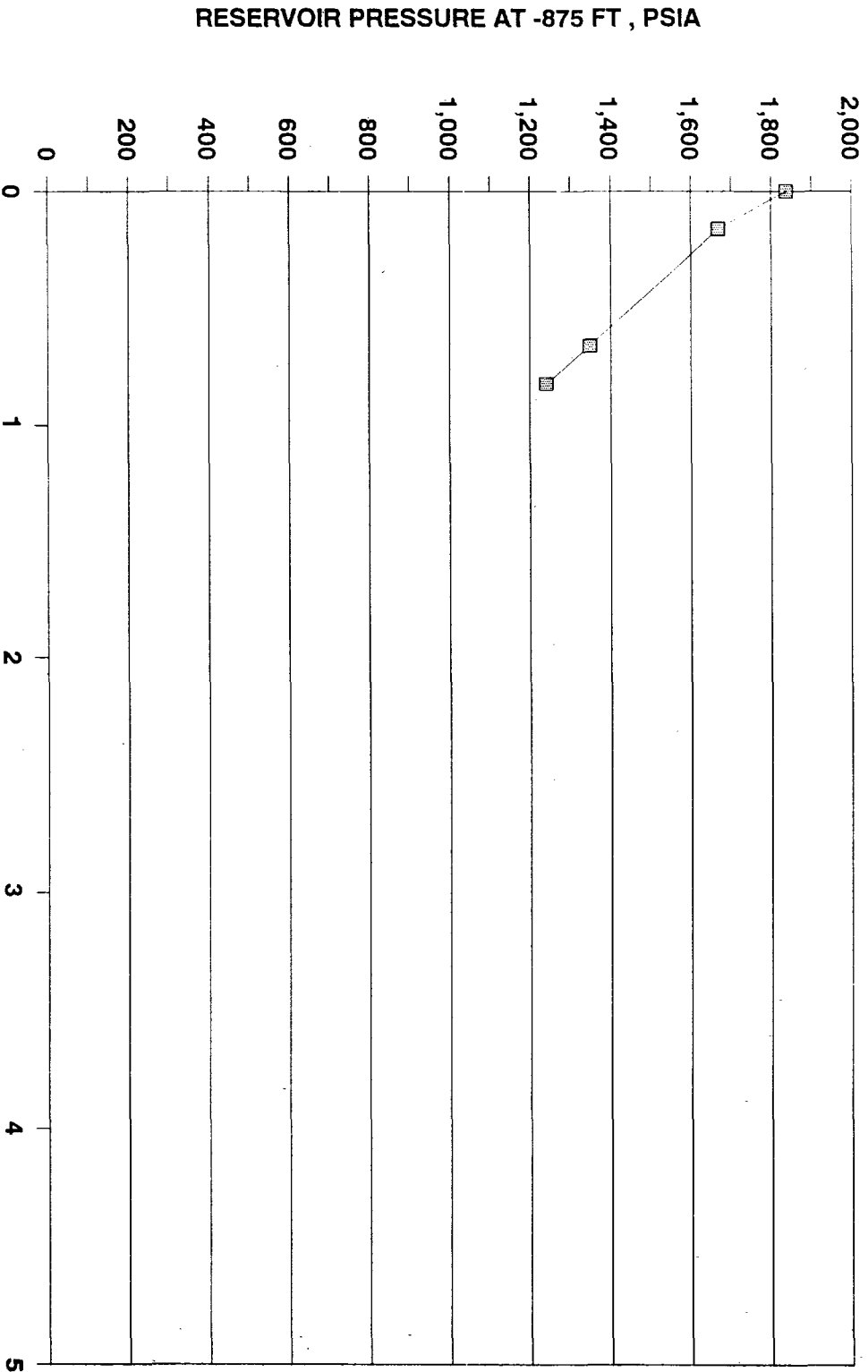
EXHIBIT NO.: 7

OPERATOR: SIETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

RESERVOIR PRESSURE PERFORMANCE



CUMULATIVE OIL PRODUCED, MSTB

EXHIBIT NO.: 8

OPERATOR: SIETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

RESERVOIR PRESSURE HISTORY
PARKWAY (DELAWARE) FIELD
EDDY COUNTY, NEW MEXICO

DATE	RESERVOIR PRESSURE PSIA	CUMULATIVE OIL STB
08/30/88	1,838	0
06/30/89	1,668	158,781
01/18/91	1,348 (1)	657,083
09/06/91	1,241 (2)	817,114

- (1) AVERAGE OF APACHE 2A 01/18/91 AND OSAGE FEDERAL NO 1 02/13/91 TESTS
(2) AVERAGE OF APACHE 2A 09/06/91 AND OSAGE FEDERAL NO 2 09/11/91 TESTS

GAS-OIL-RATIO versus OIL RATE

SIETE OIL & GAS CORPORATION
OSAGE FEDERAL NO.1
PARKWAY (DELAWARE) FIELD

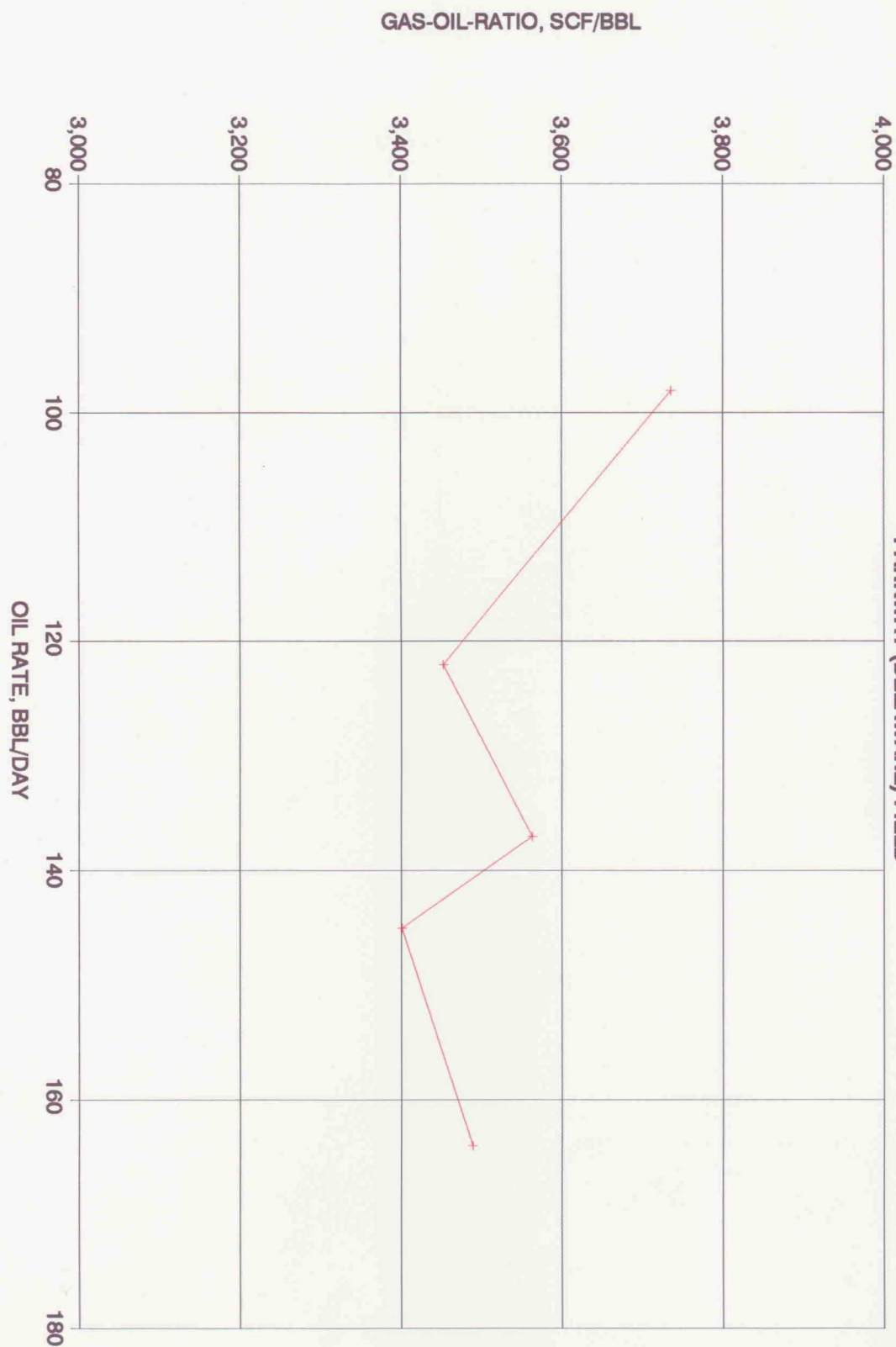


EXHIBIT NO.: 9

OPERATOR: SIETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

WELL PERFORMANCE
 OSAGE FEDERAL NO.1
 SIETE OIL & GAS CORP.
 PARKWAY (DELAWARE) FIELD
 EDDY COUNTY, NEW MEXICO

DATE	OIL (BBL)	GAS (MCF)	GOR (SCF/BBL)	TUBING PRESSURE (PSIA)	CASING PRESSURE (PSIA)	CHOKE SIZE (INCHES)
09/20/92	98	366	3735	370	490	18/64"
09/21/92	122	421	3451	370	480	20/64"
09/22/92	137	488	3562	330	450	22/64"
09/23/92	145	493	3400	340	450	24/64"
09/24/92	164	572	3488	240	388	26/64"

**RESERVOIR SIMULATION RESULTS
COMPARISON OF RECOVERABLE OIL
PARKWAY (DELAWARE) FIELD**

EDDY COUNTY, NEW MEXICO

<u>CASE</u>	<u>RECOVERABLE OIL STB</u>	<u>PERCENT RECOVERY</u>
With gas limit of 160 MCFD on all the wells	2,686,340	8.6
Without gas limit on all Siete Oil & Gas operated wells and 160 MCFD limit on the other wells	2,690,320	8.6

EXHIBIT NO.: _____

10

OPERATOR: SIEETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

Exhibits 1 through 10

PADILLA & SNYDER
ATTORNEYS AT LAW
200 W. MARCY, SUITE 216
P.O. BOX 2523
SANTA FE, NEW MEXICO 87504-2523
FACSIMILE: (505) 988-7592
TELEPHONE: (505) 988-7577

September 10, 1992

CERTIFIED MAIL

TO: OFFSET OPERATORS (See attached list)
RE: Application of Siete Oil & Gas
Corporation for a GOR Limitation
Determination, Eddy County, New Mexico

EXHIBIT NO.:

OPERATOR:

DOCKET NO.:

DATE:

1
SIETE OIL & GAS

10562

OCTOBER 1, 1992

Pursuant to the Rules and Regulations of the General Rules of the Oil Conservation Division of New Mexico, notice is given of the above-referenced application. You may protest the enclosed application by appearing at the hearing of this application which will be heard on October 1, 1992 beginning at the hour of 8:15 a.m., at the offices of the Oil Conservation Division, State Land Office Building, 310 Old Santa Fe Trail, Santa Fe, New Mexico.

Should you desire to waive objection to the application, you may sign the enclosed waiver form and return it to the undersigned counsel for Siete Oil & Gas Corporation.

Very truly yours,



Ernest L. Padilla

ELP:pmc
Enclosures as stated

OFFSET OPERATORS - PARKWAY

Meridian Oil, Inc.
P. O. Box 51810
Midland, Texas 79710-1810
Attn: Mo Gaddis

Ray Westall
P. O. Box 4
Loco Hills, NM 88255

UMC Petroleum
1201 Louisiana, Suite 1400
Houston, TX 77002
Attn: Brian Baer

Strata
700 Petroleum Building
Roswell, NM 88201
Attn: George L. Scott

Presidio Oil Company
P. O. Box 6525
Englewood, Colorado 80155-6525
Attn: Marshall Munsell, Land Manager

Santa Fe Energy
550 W. Texas Ave., Suite 1330
Midland, Texas 79701
Attn: Randy Offenberger

Chevron
P. O. Box 1150
Midland, Texas 79702
Attn: Larry La Fleur

Conoco
10 Desta Drive, Suite 100 W.
Midland, Texas 79705-4500
Attn: Peggy Sutko

Eastland Oil Company, Inc.
Drawer 3488
Midland, Texas 79702
Attn: Travis Reed

Fortson Oil Company
301 Commerce St., Suite 3301
Fort Worth, Texas 76102
Attn: Jack Gevecker

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

Article Addressed to:

4. Article Number

176 152 892

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988

• U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Santa Fe Energy
550 W. Superline, #1330
Midland, TX 79701

4. Article Number

176 152 891

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

9-12-82

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988

• U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Chevron
P.O. Box 1150
Midland, TX 79702

4. Article Number

176 152 890

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

11-11-1992

8. Addressee's Address (ONLY if requested and fee paid)

1992

RECEIVED

PS Form 3811, Mar. 1988

• U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>W. H. Thompson 201 Commerce St. 140 Houston, TX 77002</i>	4. Article Number <i>P176 152 894</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature - Address X	8. Addressee's Address (ONLY if requested and fee paid) SEP 14 1992
6. Signature - Agent X <i>F. C. W.</i>	
7. Date of Delivery <i>9-10-92</i>	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Fortson Oil Co. 301 Commerce St. Ste. 3301 Fort Worth, TX 76102</i>	4. Article Number <i>P176 152 887</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature - Address X <i>Anna August</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Eastland Oil Co. Drawer 3488 Midland, TX 79702</i>	4. Article Number <i>P176 152 888</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature - Address X <i>Carl H. Massie</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery <i>9-14-92</i>	

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Kari Westall P.O. Box 4 Lima Hills, 71185255</i>	4. Article Number <i>P176 152 895</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <i>X</i>	
7. Date of Delivery	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Strata 700 Petroleum Bldg. Newark, 07102 8824</i>	4. Article Number <i>P176 152 893</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <i>X Janice Starnes</i>	
7. Date of Delivery <i>9-14-92</i>	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: <i>Meridian Ciltone P.O. Box 51810 Midland, TX 79710-1810</i>	4. Article Number <i>P176 152 896</i>
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Address <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <i>X [Signature]</i>	
7. Date of Delivery <i>9-14-92</i>	

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Conrad
Extra Sp #100 d.
Midland, TX 79705

4. Article Number

P176152889

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address

X

6. Signature Agent

X

H. 7023062

7. Date of Delivery

4-12-97

8. Addressee's Address (ONLY if requested and fee paid)

P 176 152 890

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Cherwon
Street and No.	Box 1150
City, State and ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$252
Postmark or Date	9-10-92

* U.S.G.P.O. 1984-446-014

PS Form 3800, Feb. 1982

P 176 152 891

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	S.F. Kery
Street and No.	5380 Japanese Hwy
City, State and ZIP Code	Midland, TX 79701
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$252
Postmark or Date	9-10-92

* U.S.G.P.O. 1984-446-014

PS Form 3800, Feb. 1982

P 176 152 892

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Strata
Street and No.	Box 6525
City, State and ZIP Code	Midland, TX 79702
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$252
Postmark or Date	9-10-92

* U.S.G.P.O. 1984-446-014

PS Form 3800, Feb. 1982

P 176 152 893

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Strata
Street and No.	700 Petroleum Bldg
City, State and ZIP Code	Midland, TX 79701
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$252
Postmark or Date	9-10-92

* U.S.G.P.O. 1984-446-014

PS Form 3800, Feb. 1982

P 176 152 887

RECEIPT FOR CERTIFIED MAIL

U.S. POSTAGE OFFICE PROVIDED
NOT FOR DISTRIBUTION OUTSIDE MAIL

(See Reverse)

Sent to: <i>Fortsonville Co</i>	
Special No: <i>3455</i>	
P.O. State and ZIP Code: <i>TX 79702</i>	
Postage	\$ <i>52</i>
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>52</i>
Postmark or Date	

PS Form 3800, Feb. 1982

9-10-92

P 176 152 888

RECEIPT FOR CERTIFIED MAIL

U.S. POSTAGE OFFICE PROVIDED
NOT FOR DISTRIBUTION OUTSIDE MAIL

(See Reverse)

Sent to: <i>La Alameda Del</i>	
Special No: <i>3455</i>	
P.O. State and ZIP Code: <i>TX 79702</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>52</i>
Postmark or Date	

PS Form 3800, Feb. 1982

9-10-92

P 176 152 889

RECEIPT FOR CERTIFIED MAIL

U.S. POSTAGE OFFICE PROVIDED
NOT FOR DISTRIBUTION OUTSIDE MAIL

(See Reverse)

Sent to: <i>Corcoran</i>	
Special No: <i>3455</i>	
P.O. State and ZIP Code: <i>TX 79702</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>52</i>
Postmark or Date	

PS Form 3800, Feb. 1982

9-10-92

P 176 152 894

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to <i>Mr. & Mrs. Williams</i>	
Street and No. <i>1201 Williams #1400</i>	
P.O. State and ZIP Code <i>Houston, TX 77002</i>	
Postage	\$ <i>2.52</i>
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.52</i>
Postmark or Date <i>9-10-92</i>	

PS Form 3800, Feb. 1982

* U.S.G.P.O. 1984-446-014

P 176 152 895

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to <i>Ray Stetson</i>	
Street and No. <i>Box 4</i>	
P.O. State and ZIP Code <i>Greenville, MS 38855</i>	
Postage	\$ <i>5.3</i>
Certified Fee	<i>1.00</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	<i>1.00</i>
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.52</i>
Postmark or Date <i>9-10-92</i>	

PS Form 3800, Feb. 1982

* U.S.G.P.O. 1984-446-014

P 176 152 896

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to <i>Mr. & Mrs. Williams</i>	
Street and No. <i>Box 51810</i>	
P.O. State and ZIP Code <i>Portland, TX 79710</i>	
Postage	\$ <i>5.3</i>
Certified Fee	<i>1.00</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	<i>1.00</i>
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.52</i>
Postmark or Date <i>9-10-92</i>	

PS Form 3800, Feb. 1982

* U.S.G.P.O. 1984-446-014

WAIVER

UMC Petroleum hereby waives any objection, notice and right to hearing of the Application of Siate Oil & Gas Corporation for a GOR Limitation Determination of 50000~~0~~ to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

UMC Petroleum

By: AW 

Title: Vice President, Operations

Date: September 28, 1992

WAIVER

Strata hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 50000^{mg} to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

Strata

By: Mark B. Murphy

Title: President

Date: 9/17/92

WAIVER

Meridian Oil, Inc. hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 5000 to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

Meridian Oil, Inc.

By: David L. Melick

Title: Regulatory Compliance Rep

Date: 9/11/92

WAIVER

Eastland Oil Company, Inc. hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 50000/ to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

Eastland Oil Company, Inc.

By: Francis Reed

Title: Production Superintendent

Date: 9-15-1992

MERIDIAN OIL

September 30, 1992

Michael E. Stogner
Hearing Examiner
Oil Conservation Division
State Land Office Building
Santa Fe, New Mexico 87501

Re: Oil Conservation Division
Case No. 10562
Application of Sieta Oil & Gas
GOR Exception

Dear Mr. Stogner:

Meridian Oil Inc. supports the application of Sieta Oil & Gas Corporation in the above referenced case. Meridian operates oil wells in the Parkway Delaware Pool and believes that the reservoir characteristics of the pool suggest that higher GOR rates will provide optimum producing rates. We are of the opinion that higher GOR rates will not result in waste.

Sincerely,
Meridian Oil Inc.



D. W. Rader
Engineering Manager

MPG:nak
xc: correspondence file

WAIVER

Santa Fe Energy hereby waives any objection, notice and right to hearing of the Application of Siete Oil & Gas Corporation for a GOR Limitation Determination of 5000 to 1 for the Parkway Delaware Pool in Eddy County, New Mexico.

Santa Fe Energy

By: Randy M. O'Donnell

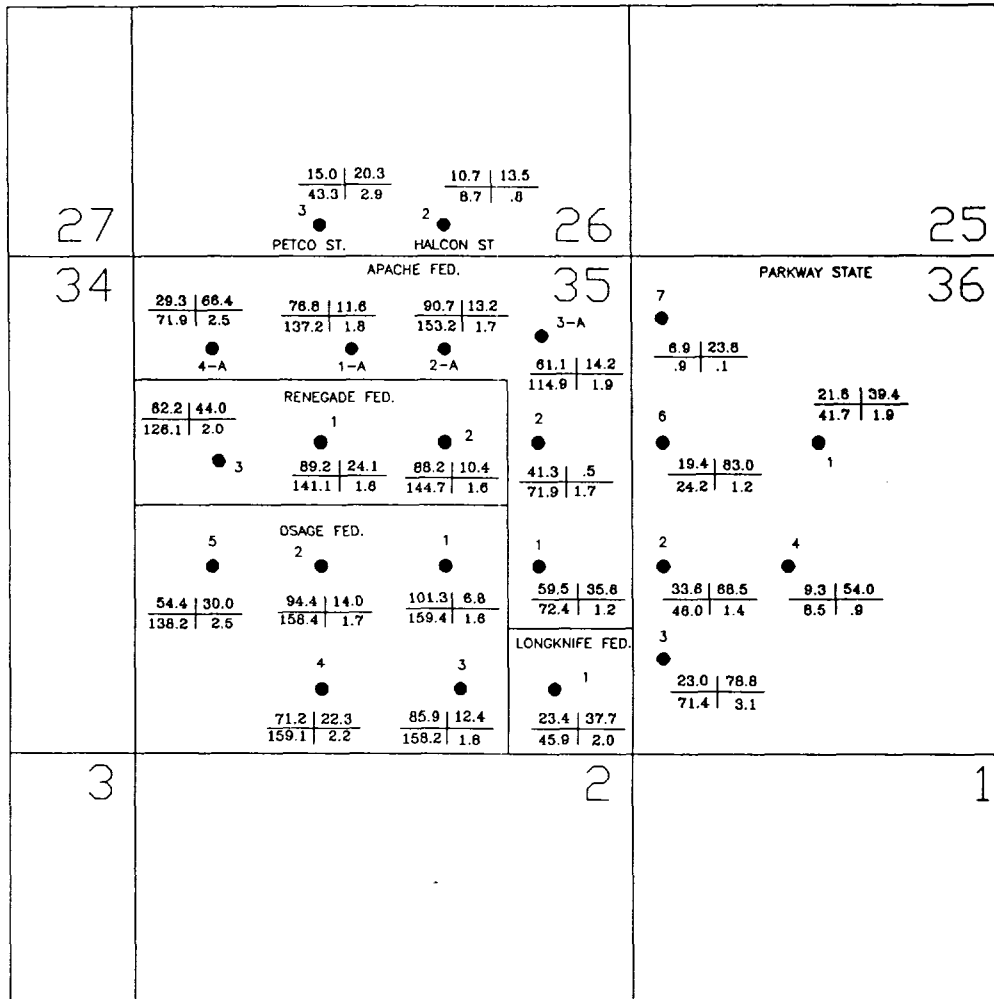
Title: VP Eng.

Date: 7/25/92

Siete

10562

1A

EXHIBIT NO.: 2OPERATOR: SIETE OIL & GAS CORP.DOCKET NO.: 10562DATE: OCTOBER 1, 1992*Township 19 South, Range 29 East**Township 20 South, Range 29 East**EDDY COUNTY, NEW MEXICO**PARKWAY FIELD*

FIELD CUMS

MBO = 1186

MBW = 793

MMCF = 2574

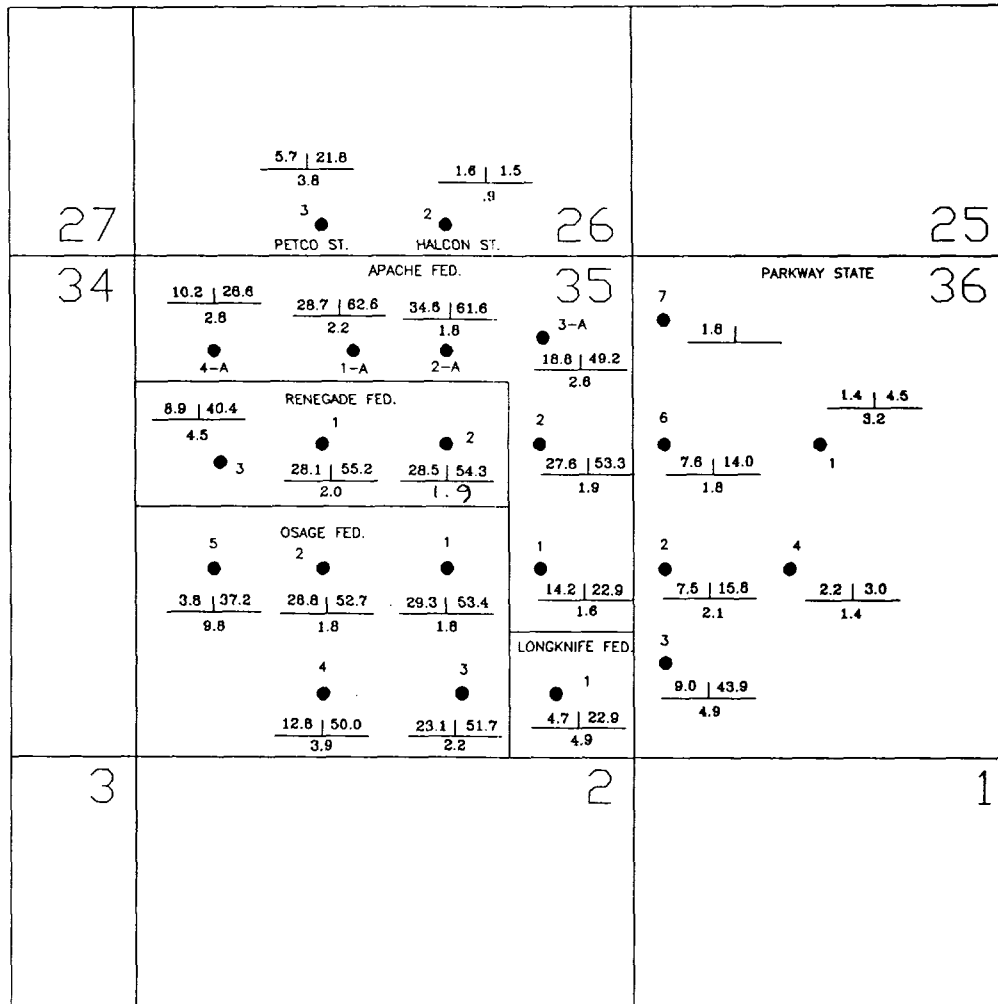
GOR = 2.2

12/91 CUMS

MBO | MBW

MMCF | GOR

Scale 1" = 2000'

EXHIBIT NO.: 3OPERATOR: SIETE OIL & GAS CORP.DOCKET NO.: 10562DATE: OCTOBER 1, 1992*Township 19 South, Range 29 East**Township 20 South, Range 29 East**EDDY COUNTY, NEW MEXICO**PARKWAY FIELD***FIELD 1991 PROD.**

Scale 1" = 2000'

MBO = 333.1
 MMCF = 786.0
 GOR = 2.36

1991 PROD.

MBO | MMCF
 GOR

PARKWAY DELAWARE

GOR vs CUM OIL

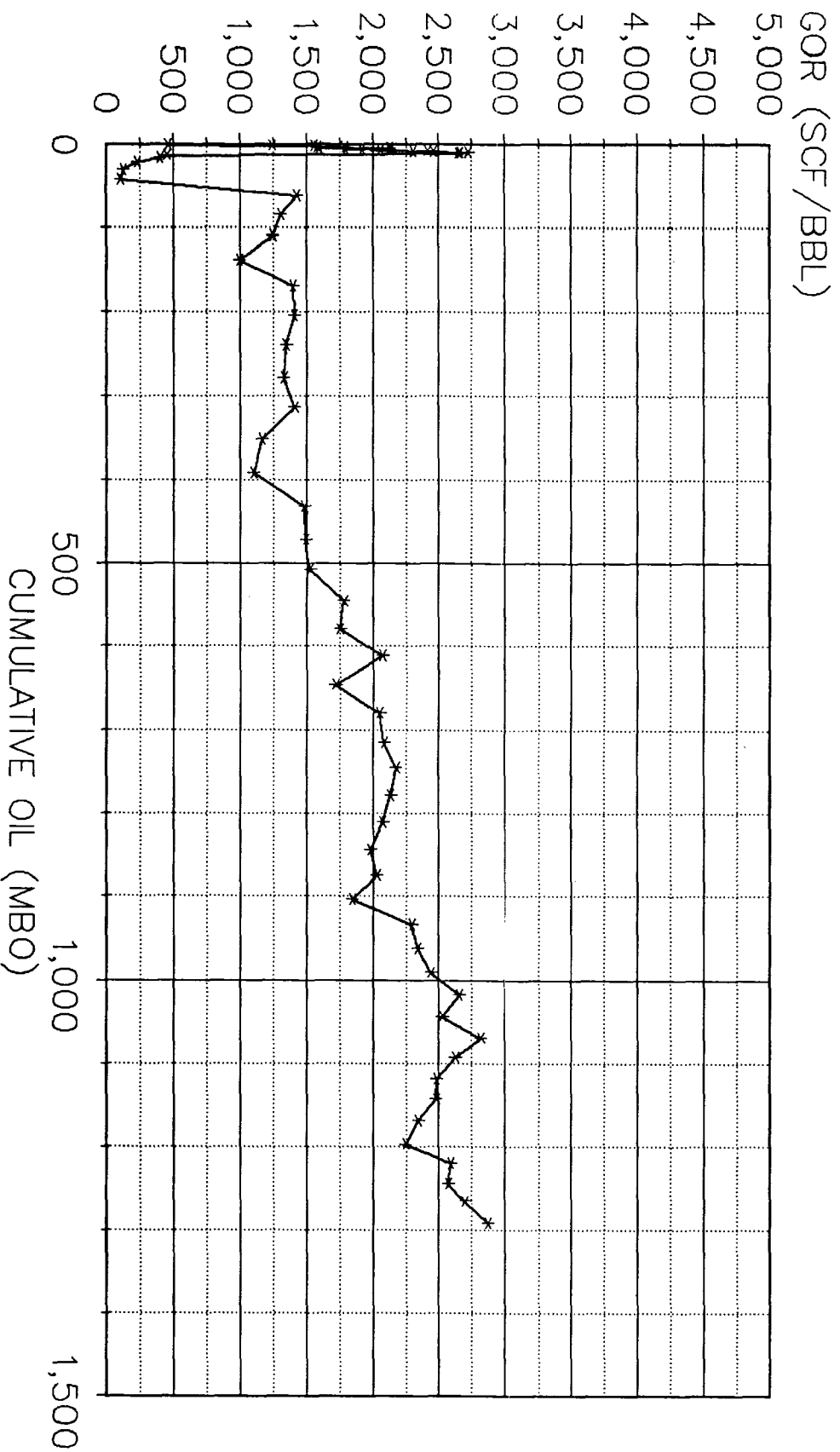


EXHIBIT NO.:

5

OPERATOR:

SIETE OIL & GAS CORP.

DOCKET NO.:

10562

DATE:

OCTOBER 1, 1992

AVALON DELAWARE

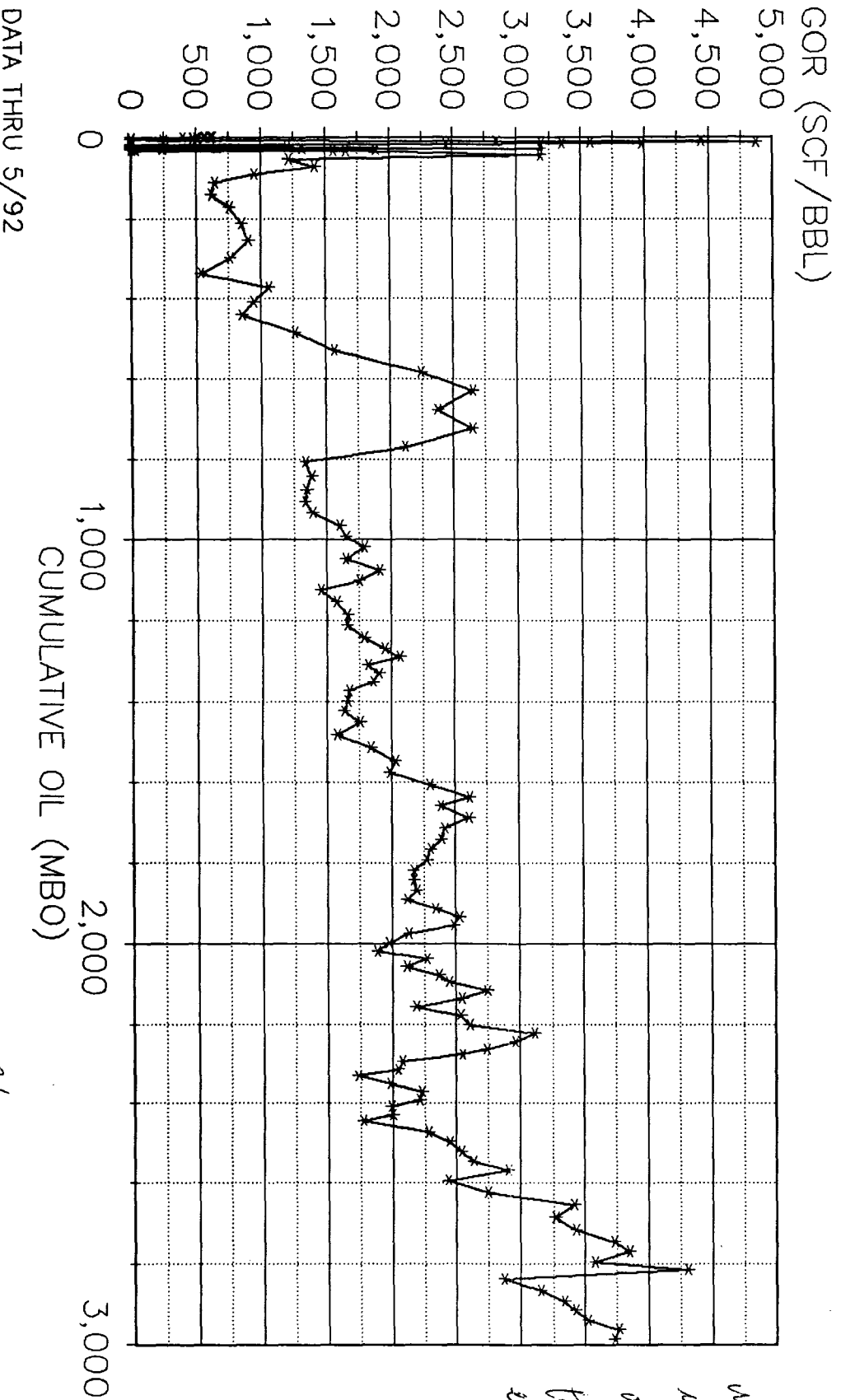
GOR vs CUM OIL

EXHIBIT NO.: 76

OPERATOR: SIETE OIL & GA

DOCKET NO.: 10562

DATE: OCTOBER 1, 199



Jan. 1, 1991

*After 7
April 7*

**RESERVOIR DATA SHEET
PARKWAY (DELAWARE) FIELD
EDDY COUNTY, NEW MEXICO**

Reservoir Drive Mechanism:	Solution Gas Drive
Average Depth:	-875 feet
Initial Reservoir Pressure at -875 feet:	1,838 psia
Reservoir Temperature:	110° F
Current Reservoir Pressure at -875 feet:**	1,241 psia
Bulk Volume:	45,122 Acre-Feet
Initial Oil FVF:	1.2213 RB/STB
Initial Solution GOR:**	483 SCF/STB
Current Solution GOR:	370 SCF/STB
Average Porosity:	18.1%
Average Water Saturation:	43.0%
Estimated Oil-Water Contact:	-1135 feet

*estimated
Res. Pressure
10,000 psi*

**As of September 1991

EXHIBIT NO.: 1

OPERATOR: SIETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

RESERVOIR PRESSURE PERFORMANCE

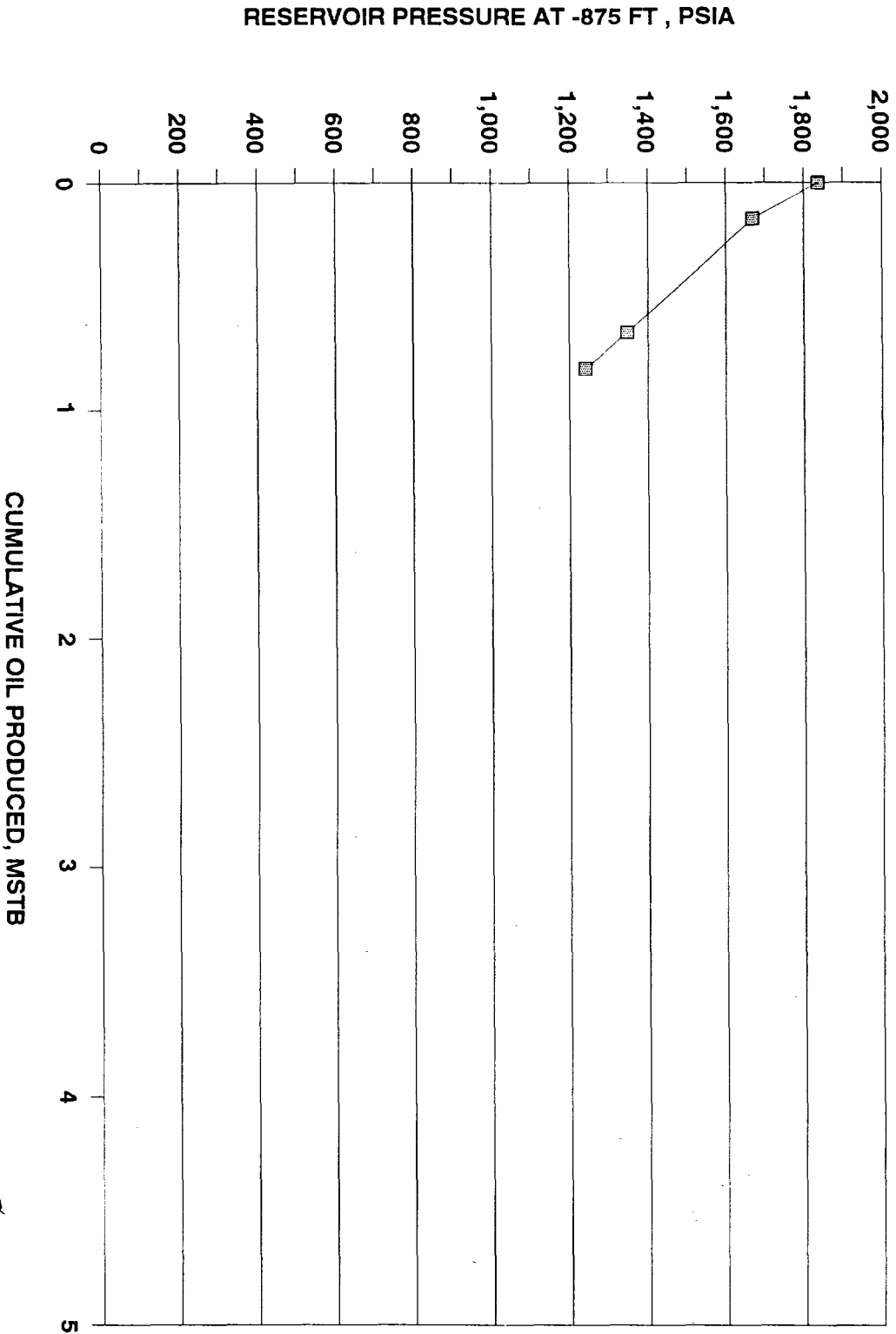


EXHIBIT NO.: 8

OPERATOR: SIETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

RESERVOIR PRESSURE HISTORY
 PARKWAY (DELAWARE) FIELD
 EDDY COUNTY, NEW MEXICO

DATE	RESERVOIR PRESSURE PSIA	CUMULATIVE OIL STB
08/30/88	1,838	0
06/30/89	1,668	158,781
01/18/91	1,348 (1)	657,083
09/06/91	1,241 (2)	817,114

- (1) AVERAGE OF APACHE 2A 01/18/91 AND OSAGE FEDERAL NO 1 02/13/91 TESTS
 (2) AVERAGE OF APACHE 2A 09/06/91 AND OSAGE FEDERAL NO 2 09/11/91 TESTS

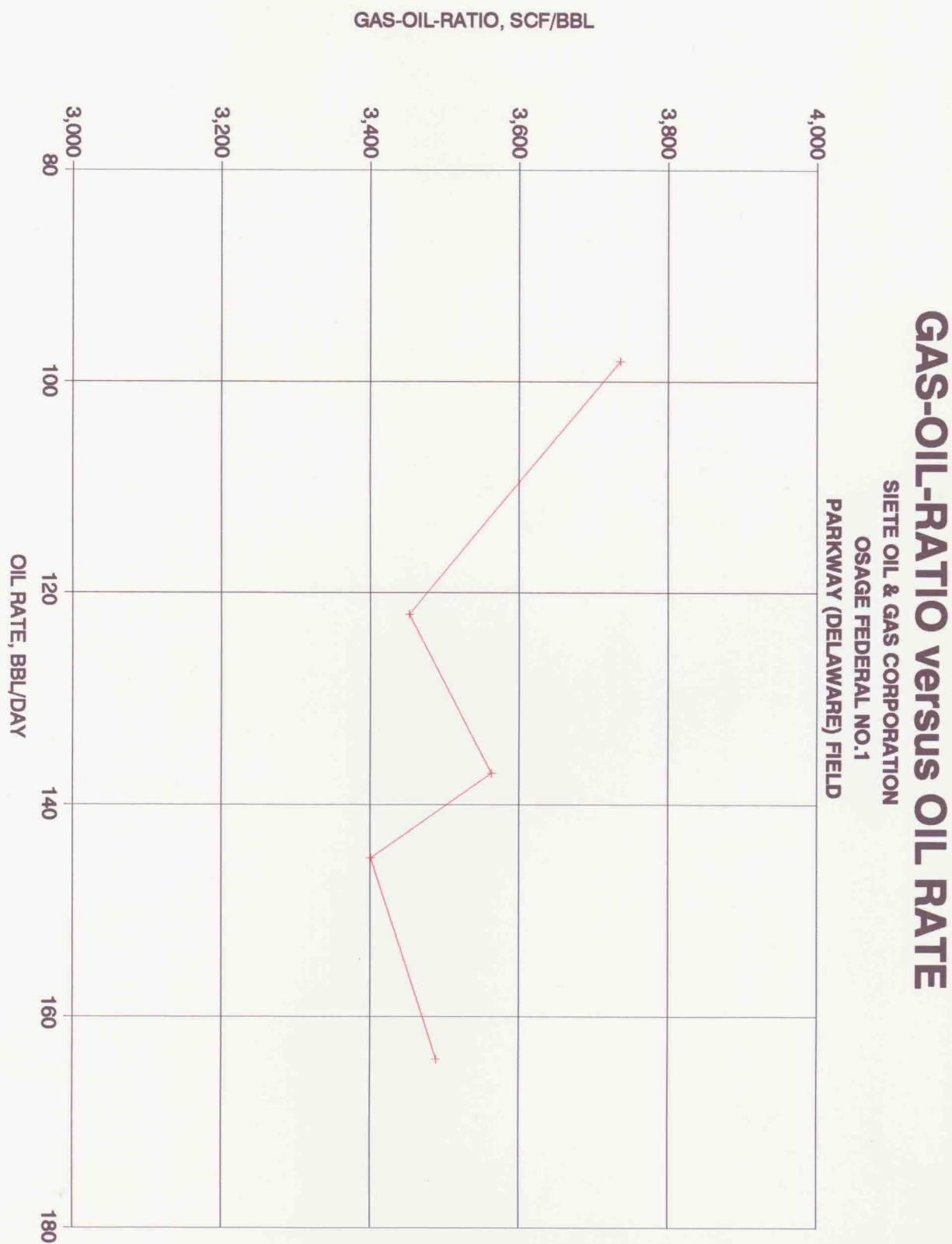


EXHIBIT NO.: 9

OPERATOR: SIETE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

WELL PERFORMANCE
 OSAGE FEDERAL NO.1
 SIETE OIL & GAS CORP.
 PARKWAY (DELAWARE) FIELD
 EDDY COUNTY, NEW MEXICO

DATE	OIL (BBL)	GAS (MCF)	GOR (SCF/BBL)	TUBING PRESSURE (PSIA)	CASING PRESSURE (PSIA)	CHOKE SIZE (INCHES)
09/20/92	98	366	3735	370	490	18/64"
09/21/92	122	421	3451	370	480	20/64"
09/22/92	137	488	3562	330	450	22/64"
09/23/92	145	493	3400	340	450	24/64"
09/24/92	164	572	3488	240	388	26/64"

**RESERVOIR SIMULATION RESULTS
COMPARISON OF RECOVERABLE OIL
PARKWAY (DELAWARE) FIELD**

EDDY COUNTY, NEW MEXICO

CASE	RECOVERABLE OIL STB	PERCENT RECOVERY
With gas limit of 160 MCFD on all the wells	2,686,340	8.6
Without gas limit on all Siete Oil & Gas operated wells and 160 MCFD limit on the other wells	2,690,320	8.6

EXHIBIT NO.: 16

OPERATOR: SIEDE OIL & GAS CORP.

DOCKET NO.: 10562

DATE: OCTOBER 1, 1992

4 1/2 per cent / well