

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

OCT 05 2009

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U.S.D.S.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PROMOTION OFFICE	

RECEIVED BY  
104-751085REQUEST FOR ALLOWABLE  
AND

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR

Santa Fe Energy Company

Address

500 W. Illinois, Suite 500, Midland, TX 79701

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Lovelace	1	Unders S. Carlsbad Morrow	State, Federal or Fee Fee	
Location				
Unit Letter	L	1090 Feet From The West	Line and 1439	Feet From The South
Line of Section	27	Township	22S	Range 27E, NMPM, Eddy County

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Llano	P. O. Drawer 1320
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	Yes 4-3-85

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 Resv.	Diff. Resv.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
10-3-84	12-14-84	12,120'	11,985'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
DF 3142.3, GL 3115.3	Morrow	11,795'	11,977'					
Perforations	Depth Casing Shoe							
11,795-11,802'	12,120'							

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	520'	625 sx C1 C
12 1/4"	9 5/8"	5,547	2300 sx Howco Lite & C1
8 1/2"	5 1/2"	12,120'	1160 sx C1 C
	2 3/8" tubing	11,977'	

## V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of food oil and must be equal to or exceed top all-able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	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

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2482	1 hr	0	--
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
back pressure	3912		18/64"

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

Billie Hood  
(Signature)  
Sr. Production Clerk  
4-3-85  
(Date)

## OIL CONSERVATION DIVISION

APPROVED APR 17 1985, 19  
Original Signed By  
BY Les A. Clements  
TITLE Supervisor District II

This form is to be filed in compliance with RULE 1107  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for wells able on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of formation, well name or number, or transporter or other such change of condition.  
Separate Form C-104 must be filed for each pool in multi-compartments wells.