

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY

MAR 20 1985

O. C. D.

ARTESIA, OFFICE

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LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
REGISTRATION OFFICE	

Santa Fe Exploration Company

Address

P. O. Box 1136, Roswell, New Mexico 88202-1136

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

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Mountain States Federal	#1	Turkey Track, S.F., Q. Grb., SA	State, Federal or Fee Federal	NM-010907-
Location				
Unit Letter	P	990'	Feet From The East Line and 330'	Feet From The South
Line of Section	35	T. Township	18-S	Range
			29-E	NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Navajo Refining Company	P. O. Drawer 159, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company	Bartlesville, OK 74004	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	P	35
		Twp.
		18S
		Rge.
		29E
Is gas actually connected?	No	When
		ASAP

If this production is commingled with that from any other lease or pool, give commingling order number:

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		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
12-26-84	3-1-85	3505'						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3423'	Queen, Grayburg, S/A	2252'	3431'					
Perforations		Depth Casing Shoe						
2252-3451', 55 holes, 1 JSPF								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
18"	14" Cond.	23'	Redi-Mix to Surf
12-1/4"	8-5/8"	301'	200 sx C1 "C" Circ
7-7/8"	5-1/2"	3503'	263 sx POZ & 280 sx C1
	2 7/8"	2431'	

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)

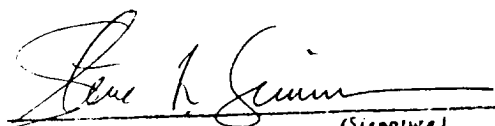
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3-1-85	3-12-85	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	N/A	N/A	N/A
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	20	30	32

GAS WELL

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

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.



Steve L. Simmons, Agent

(Title)

March 18, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED **MAR 22 1985**, 10BY **ORIGINAL SIGNED**
BY LARRY BROOKS
GEOLOGIST - NMOCTITLE
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 deviated tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions.
Separate Form C-104 must be filed for each pool in multi-completed wells.