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O. C. D. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	

OIL CONSERVATION DIVISION
P. O. BOX 2000
SANTA FE, NEW MEXICO 87501
O. C. D. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Santa Fe Exploration Company (505-623-2733)

Address P.O. Box 1136/Roswell, NM 88202

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
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.
Tenneco State	1	Turkey Track, SR, Queen, Grayburg, SA	State, Federal or Fee State	B-7717
Location	Unit Letter	Feet From The	Line and	Feet From The
	D	990	North	330
	Line of Section	T. and R.	Range	County
	2	19-S	29-E	NMDM, Eddy

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	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 ☒ or Dry Gas ☐	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.	Is gas actually connected? When
D 2 19S 29E	Yes September 7, 1984

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	Some Other	Drill Back
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
7-24-84	8-9-84	3535	3530					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3428.2 GL	Queen/Grayburg/San Andres	2304	3182					
Perforations			Depth Casing Shoe					
			3530					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	352'	220
7-7/8"	5-1/2"	3535'	420

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 oil 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.)	Choke Size
August 9, 1984	9-25-84	Pump	10-2
Length of Test	Tubing Pressure	Casing Pressure	Gas-MCF
24 hrs	--	--	202
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	
	105	85	

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
(Signature)
Steve L. Simmons, Agent
(Title)9/1/84
(Date)OIL CONSERVATION DIVISION
SEP 26 1984APPROVED
BY LARRY BROOKS
GEOLOGIST - NMOCTITLE
This form is to be filed in compliance with Rule 11.1. If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the data taken on the well in accordance with Rule 11.1. All sections of this form must be filled out completely for wells on new and recompleted wells. Fill out only Sections I, II, III, and VI for change of well name or number, or transporter, or other such change of data. Separate Form C-104 must be filed for each pool in recompleted wells.