

OIL CONSERVATION DIVISION

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SANTA FE, NEW MEXICO 87501

JAN 16 1986

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

Siete Oil & Gas Corporation

Address

P. O. Box 2523, Roswell, NM 88201

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

B. DESCRIPTION OF WELL AND LEASE

Lease Name Geronimo Federal	Well No. 1	Pool Name, including Formation Wildcat - Delaware	Kind of Lease State, Federal or Fee Federal	Lease No. NM025777
Location				
Unit Letter G	2310	Feet From The North	Line and 2310	Feet From The East
Line of Section 24	Township 18S	Range 31E	NMPM Eddy	County

C. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent.) P. O. Box 2528, Hobbs, NM 88240			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent.) 4001 Penbrook, Odessa, TX			
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 24	Twp. 18	Rgn. 31
	Is gas actually connected?		When	
	Yes		July 10, 1985	

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

D. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'r.	Dull Res'r.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.S.T.D.			
Elevation (B.F., R.R., RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
					Post FD-3			
					1-24-86			
					Chg. LT: PP			

E. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

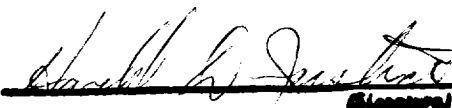
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Cable Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (piston, back pr.)	Tubing Pressure (Start-End)	Casing Pressure (Start-End)	Cable Size

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.



Production Supervisor

(Title)

1/16/86

OIL CONSERVATION DIVISION

JAN 16 1986

APPROVED _____, IS

BY _____
Original Signed By
Les A. ClementsTITLE _____
Supervisor District II

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 closest test 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.

Will not only Sections I, II, III, and VI for changes of com