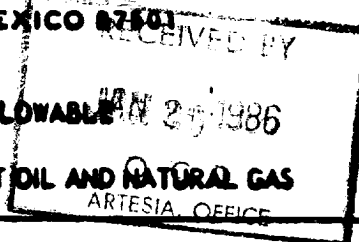


OIL CONSERVATION DIVISION

Form C-104
Revised 10-1-78

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



NO. OF COPIES REQUIRED	
DISTRICT OFFICE	
SANTA FE	☒
FILE	☒
U.S.A.	
LAND OFFICE	
TRANSPORTER	☒
OPERATOR	☒
PRODUCTION OFFICE	

Operator
Siete Oil & Gas Corporation

Address
P. O. Box 2523, Roswell, NM 88201

Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)
New Well ☒	Oil ☒ Dry Gas ☐	Authorization to Transport Gas
Recompletion ☐	Coastguard Gas ☐ Condensate ☐	
Change in Ownership ☐		

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Blackhawk Federal	Well No. 1	Pool Name, including Formation Yates-7R-Queen-Grayburg	Kind of Lease State, Federal or Fee Federal	Lease No. LC065680
Location Unit Letter <u>K</u> ; <u>2310</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u>				
Line of Section <u>24</u> Township <u>18-S</u> Range <u>31-E</u> , NMPM, <u>Eddy</u> County				

III. 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)
Texas New Mexico Pipeline Company	P. O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Coastguard Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	4001 Penbrook, Odessa, TX 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Top. Rgn. Is gas actually connected? When
<u>K</u> <u>24</u> <u>18-S</u> <u>31-E</u>	<u>Yes</u> <u>7/11/85</u>

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 Reservoir	Different Reservoir
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Elevation (SP, RKB, RT, GR, 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					

V. 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.)	
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/MCF	Gravity of Condensate
Testing Method (piston, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke 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)

1/16/85

OIL CONSERVATION DIVISION

APPROVED JAN 16 1986, 19
BY Les A. Clements
TITLE Supervisor District

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 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.

Fill out only Sections I, II, III, and VI for changes of owner