

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

NO. OF PRODUCE RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.D.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PRODUCTION OFFICE	

RECEIVED BY

APR 22 1986

O. C. D.
ARTESIA, N.M.REQUEST 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

☒

Recompletion

☐

Change in Ownership

☐

Change in Transporter of:

Oil

☐

Casinghead Gas

☐

Dry Gas

☐

Condensate

☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE

PLACED AFTER 5-24-86

UNLESS AN EXCEPTION FROM

THE B. L. M. IS OBTAINED

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.
Lusk 20 Federal	1	N. Hackberry - Y-SR	State (Federal or Fee)	NM-63362
Location				
Unit Letter	H	: 1980 Feet From The	N Line and	660 Feet From The
Line of Section	20	Township	19S	Range
			31E	NMPL, Eddy
				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)	
Permian	P. O. Box 3119, Midland, TX 79702	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)	
None		
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	H	20
		19S
		31E
		Is gas actually connected?
		When

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	Diff. Res.
X	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.					
12-27-85	4-4-86	2300'	2295'					
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3462' GR	Yates	2172'	2165'					
Perforations	Depth Casing Shoe							
2172-178'; 2182-189'; 2191-195'	2300'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	8 5/8	505	450 SX					
7 7/8	4 1/2	2300	1100 SX					
	2 3/8	2165						

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 of hole 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.)	
4-4-86	4-11-86	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hr	0	0	1 1/4 (X)
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	38	11	TSTM

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

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)

Billie Hood

Sr. Production Clerk

(Title)

4-21-86

(Date)

OIL CONSERVATION DIVISION

APR 23 1986

APPROVED _____, 19__

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

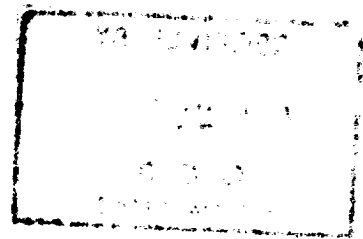
This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviate taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for a well on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of record.

Separate Forms C-104 must be filed for each pool in multiple completion.



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