

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

RECEIVED BY

JUN 25 1986

O. C. D.

ARTESIA OFFICE

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Siete Oil & Gas Corporation

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

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<u>Well name from Perm #2</u>
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	
	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Arco Federal</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Shugart-Y-SB-Q-G</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>NM-2938</u>
Location				
Unit Letter <u>C</u>	<u>950</u> Feet From The <u>North</u>	Line and <u>2310</u> Feet From The <u>West</u>	<u>Post ID-3</u> <u>7-4-86</u> <u>Chg Well Name</u>	
Line of Section <u>24</u>	Township <u>18</u>	Range <u>31</u>	<u>NMPM</u> , <u>5412</u>	<u>Eddy</u> County

III. 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)
<u>Texas New Mexico Pipeline Corporation</u>	<u>P.O. Box 2528, Hobbs, NM 88240</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Corporation</u>	<u>4001 Penbrook, Odessa, TX 79762</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>E</u> Sec. <u>24</u> Twp. <u>18</u> Rge. <u>31</u>	<u>Yes</u> <u>06/20/86</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

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 is true and complete to the best of my knowledge and belief.

A.D. Justice  
(Signature)  
Production Supervisor  
(Title)  
06/23/86  
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 27 1986, 19 \_\_\_\_\_

BY Original Signed By  
Les A. Clements

TITLE 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 deviation tests 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, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

#### IV. 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					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
06/02/86	06/21/86		4500'		4487'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
3710' GR	Grayburg		4264' - Grayburg		4237'				
Perforations						Depth Casing Shoe			
4264' to 4272' - 9 perms						4498'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8" 23# J-55		357' KB		250 sxs High Early II				
7 7/8"	5 1/2" 15.5# J-55		4497' KB		500 sxs DLW III				
					250 sxs A 50/50 Poz				
5 1/2" 15.5#	2 3/8" 4237				N/A				

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of seal volume of leak 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.)	
06/20/86	06/21/86	Pumping (American 114)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours	N/A	N/A	N/A
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
140 Bbls	50	90	44

#### GAS WELL

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