

CONFIDENTIAL

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

AUG 15 '88

O. C. D.
ARTESIA, 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 88202-2523

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil ☐ Dry Gas
☐ Casingshead Gas ☐ Condensate
 Other (Please explain)
 CASINGSHEAD GAS MUST NOT BE
 PRODUCED FROM 10/15/88

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Osage Federal	Well No. 1	Pool Name, including Formation Wildcat PARKWAY DELAWARE	Kind of Lease State, Federal or Fee Federal	Lease No. NM-24160
Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line of Section 35 Township 19S Range 29E NMPM, Eddy 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"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 460 Hobbs, NM 88240	
Name of Authorized Transporter of Casingshead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Pending	Address (Give address to which approved copy of this form is to be sent) N/A	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 35
	Twp. 19S	Range 29E
Is gas actually connected?	When 9/12/88	
	N/A	

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.


(Signature)
Production/Reservoir Engineer
(Title)
August 12, 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 17 1988, 19
BY Original Signed By
Mike Williams
TITLE

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.

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Form C-104
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Page 2

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7/12/88	Date Compl. Ready to Prod. 8/12/88		Total Depth 5910		P.S.T.D. 5848				
Elevations (DF, RKB, RT, CR, etc.) 3325' KB	Name of Producing Formation Delaware		Top Oil/Gas Pay 3914 4135		Tubing Depth 4102' SN				
Perforations 4135 - 4168 w/21 shots						Depth Casing Shoe 5908'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2"	13 3/8"		353'		350 sks				
12 1/4"	8 5/8"		3193'		2860 sks				
7 7/8"	5 1/2"		5908'		620 sks				
	2 3/8"		4122'						

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 8/11/88	Date of Test 8/12/88	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 180	Casing Pressure 350	Choke Size 20/64"
Actual Prod. During Test 300	Oil - Bbls. 125	Water - Bbls. 175	Gas - MCF 153 (Est)

GAS WELL

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