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**DISTRICT II**  
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**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page  
d5P  
BT  
GT  
DP

SEP 15 '89

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

O. C. D.

**I. Operator**

Santa Fe Energy Operating Partners, L.P.	Well APITSA, OFFICE 30-015-26077
Address 500 W. Illinois, Suite 500, Midland, Texas 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Parkway 36 State	Well No. 6	Pool Name, Including Formation Parkway Delaware	Kind of Lease (State, Federal or Fee) State	Lease No. V-1576
Location Unit Letter <u>E</u> : 1980 Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>West</u> Line Section <u>36</u> Township <u>19S</u> Range <u>29E</u> , 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"/> Texaco Trading & Transportation Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6196, Midland, TX 79711	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Delaware Natural Gas Co., Inc.	Address (Give address to which approved copy of this form is to be sent) 9111 Jellyville Rd. #215, Austin, TX 78759	
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 36
	Twp. 19S	Rge. 29E
	Is gas actually connected? Yes	When? September 6, 1989

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 5-11-89	Date Compl. Ready to Prod. 9-4-89		Total Depth 4790'		P.B.T.D. 4464'			
Elevations (DF, RKB, RT, GR, etc.) 3340.8' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 4324'		Tubing Depth 4422'			
Perforations 4324-4396' (18 holes)					Depth Casing Shoe			
<b>TUBING, CASING AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	11 3/4" 47#		406'		750 sx C + 13 yds R-mix			
9 7/8"	7" 23#		3184'		540 sx C + 1695 sx 1" jobs			
6"	4 1/2" 10.5#		4790'		300 sx Lite & 280 sx C			
	2 3/8"		4422'					

**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.)

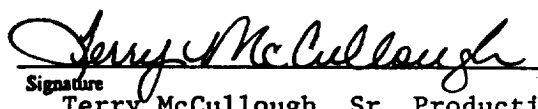
Date First New Oil Run To Tank 8-27-89	Date of Test 9-4-89	Producing Method (Flow, pump, gas lift, etc.) Pumping 1 3/4" x 16' tbg pump barrel	
Length of Test 25 hrs.	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 53	Water - Bbls. 116	Gas- MCF 66

**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. OPERATOR 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.

  
Signature  
Terry McCullough, Sr. Production Clerk  
Printed Name  
9-12-89  
Date  
915/687-3551  
Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved SEP 26 1989

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

**INSTRUCTIONS:** This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.