

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Siete Oil and Gas Corporation		Well API No. 30-015-26157
Address P.O. Box 2523 Roswell, New Mexico 88202-2523		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of <input type="checkbox"/> Other (Please explain) 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"/>		

CONFIDENTIAL

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Osage Federal	Well No. 9	Pool Name, Including Formation Wildcat Bone Spring	Kind of Lease State, Federal or Fee	Lease No. NM-24160
Location Unit Letter B : 990 Feet From The North Line and 1980 Feet From The East Line Section 34 Township 19S Range 29E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Conoco, Inc.	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 460, Hobbs NM 88220				
Name of Authorized Transporter of Casinghead Gas Phillips 66 Natural Gas Company	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Bartlesville, OK				
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 34	Twp. 19S	Rge. 29E	Is gas actually connected? No	When? 10/1/89

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 8/3/89	Date Compl. Ready to Prod. 9/9/89	Total Depth 9400'	P.B.T.D. 9358'					
Elevations (DF, RKB, RT, GR, etc.) 3319' GR	Name of Producing Formation 2nd Bone Spring Sand	Top Oil/Gas Pay 7790'	Tubing Depth 7770'					
Perforations 7790' - 8002' (2nd Bone Spring Sand)			Depth Casing Shoe 9400'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
26"	20"	343'	615 sxs (90sxs w/1")					
17 1/2"	13 3/8"	1141'	1000 sxs circ					
12 1/4"	8 5/8"	3200'	1050 sxs (531sxs w/1")					
7 7/8"	5 1/2"	9400'	700 sxs circ off DV Tool					

V. TEST DATA AND REQUEST FOR ALLOWABLE

2 7/8" tbg, set @ 7770'			
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 9/9/89	Date of Test 9/14/89	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 180	Casing Pressure 1000	Choke Size 24/64"
Actual Prod. During Test 504	Oil - Bbls. 448	Water - Bbls. 56	Gas - MCF 582

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
Cathy Batley, Drilling & Production Tech.
Printed Name
September 15, 1989
Date
(505)622-2202
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.