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

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

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

RECEIVED

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

OIL CONSERVATION DIVISION FEB - 6 1991

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

O. C. D.  
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Siete Oil and Gas Corporation	Well API No. 30-015-26028
Address P.O. Box 2523, Roswell, NM 88202-2523	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <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 Osage Federal	Well No. 17	Pool Name, Including Formation Parkway Bone Spring	Kind of Lease State, Federal or Fee	Lease No. NM-24160
Location Unit Letter K : 2310 Feet From The South Line and 2310 Feet From The West 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) 10 Desta Dr., Rm. 528-W, Midland, TX 79705				
Name of Authorized Transporter of Casinghead Gas Phillips 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? yes	When? 1/18/91

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 11/12/90	Date Compl. Ready to Prod. 12/21/90		Total Depth 9500'		P.B.T.D. 8200'			
Elevations (DF, RKB, RT, GR, etc.) 3308' GL	Name of Producing Formation Bone Spring		Top Oil/Gas Pay 6974'		Tubing Depth 6983' 6893			
Perforations 6974'-6990.5' Bone Spring					Depth Casing Shoe 8243'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"	20"		366'		800 sxs circ			
17½"	13 3/8"		1120'		750 sxs circ			
12¾"	8 5/8"		3200'		1400 sxs (1" w/537 sxs)			
7 7/8"	5½"		8243'		990 sxs			

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 1/18/91	Date of Test 1/20/91	Producing Method (Flow, pump, gas lift, etc.) 22.8 American PII	
Length of Test 24 hrs	Tubing Pressure N/A	Casing Pressure N/A	Choke Size comp 4 BR
Actual Prod. During Test 53	Oil - Bbls. 17	Water - Bbls. 36	Gas - MCF 50 (est)

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.

Cathy Batley-Seely  
Signature  
Cathy Batley-Seely, Drilling Technician  
Printed Name  
2/5/91  
Date  
(505)622-2202  
Title  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 11 1991

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.