

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Siete Oil and Gas Corporation	Well API No. 30-015-27754
Address P.O. Box 2523, Roswell, NM 88202-2523	
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 Seminole Federal 13529	Well No. 1	Pool Name, Including Formation Willow Lake Delaware 64453	Kind of Lease State, Federal or Fee	Lease No. NM-16104
Location Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line Section 1 Township 25S Range 28E, 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips 66 Transportation	4001 Penbrook, Odessa, TX 79762					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Contract Pending						
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 1	Twp. 25S	Rge. 28E	Is gas actually connected? no	When? 3/1/93

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 11/27/93	Date Compl. Ready to Prod. 1/1/94	Total Depth 6429'	P.B.T.D. 6388'					
Elevations (DF, RKB, RT, GR, etc.) 2930' GR	Name of Producing Formation Delaware	Top Oil/Gas Pay 4902'	Tubing Depth 4856'					
Perforations 4902'-14', 4928'-41.5', 4949'-4952', 4986'-5002.5'			Depth Casing Shoe 6429'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13 3/8"	605'	600 sxs					
12 1/4"	8 5/8"	2625'	1000 sxs					
7 7/8"	5 1/2"	6429'	700 sxs (DV Tool @ 4003')					
	2 7/8"	4856'						

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 1/1/94	Date of Test 1/4/94	Producing Method (Flow, pump, gas lift, etc.) Mark 160 Pumping Unit	
Length of Test 24 hrs	Tubing Pressure n/a	Casing Pressure n/a	Choke Size n/a
Actual Prod. During Test 160	Oil - Bbls. 30	Water - Bbls. 130	Gas - MCF 20(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.

Signature  
Cathy Batley-Seely, Reg. Spec.  
Printed Name  
1/5/94  
Date  
(505) 622-2202  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 3 1994

By  
SUPERVISOR, DISTRICT II  
Title

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.