

## OIL CONSERVATION DIVISION

DISTRICT 3  
P.O. Drawer DD, Artesia, NM 88210

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator		Well API No.	
SG Interests I, Ltd.		30-045-28815	
Address			
P. O. Box 421, Blanco, NM 87412-0421			
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

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Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	
Federal 28-9-9	1	Basin Fruitland Coal	<del>State</del> , Federal or <del>Free</del>	NM-04202
Location				
Unit Letter	N	1035	Feet From The South	Line and 1490 Feet From The East Line
Section	9	Township	28N	Range 9W, NMPM, San Juan County

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)		
Gary-Williams Energy Corporation				P. O. Box 159, Bloomfield, NM 87413		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company				P. O. Box 4990, Farmington, NM 87499		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
	N	9	28N	9W	No	Approx 4-30-93

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	Gas Well X	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 11-13-92	Date Compl. Ready to Prod. 3-31-93	Total Depth 3130'				P.B.T.D. 3072'			
Elevations (DF, RKB, RT, GR, etc.) 6650' GR	Name of Producing Formation Fruitland Coal	Top Oil/Gas Pay 2819'				Tubing Depth 2953'			
Perforations 2923'-2941', 2859'-2868', & 2819'-2837'						Depth Casing Shoe 3115'			

## TUBING, CASING AND CEMENTING RECORD

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	511'	300 sx Class B w/2% CaCl
7 7/8"	5 1/2"	3115'	305 sx Pacesetter Lite +
			100 sx Class B w/1% CF-14
	2 3/8"	2953'	& 0.4% Thrifty Lite

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 null & void)

OIL WELL (Test must be after recovery of total volume of well and must be equal to or greater than 100 bbls.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

**RECEIVED**

APR 22 1993

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**DIST. 3**

CAS WELL SI - W01 PL Conn/Initial Potential - will submit when tested.

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in) 400 psi	Casing Pressure (Shut-in) 400 psi	Choke Size 1/4"

# VL 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 <i>Carrie A. Baze</i>		Agent
Printed Name	Carrie A. Baze	Title
Date	4/21/92	(915) 694-6107
		Telephone No.

## OIL CONSERVATION DIVISION

Date Approved May 03 1993  
By [Signature]  
SUPERVISOR DISTRICT **13**  
Title \_\_\_\_\_

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

- 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.