

at 5 Copies
Appropriate District Office
RICT I
Box 1980, Hobbs, NM 88240

RICT II
Drawer DD, Artesia, NM 88210

RICT III
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

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

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NOV 15 1991

O. C. D.
ARTESIA OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator <u>Old Loco Oil</u>	Well API No. 3001525502
Address P.O. Box 113, Loco Hills, N.M. 88255	
Function(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Completion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Name of operator give name Address of previous operator <u>Siete Oil & Gas, P.O. Box 2523, Roswell, N.M. 88201</u>	

DESCRIPTION OF WELL AND LEASE

Well Name <u>Sackett</u>	Well No. #2	Pool Name, Including Formation Grayburg Jackson	Kind of Lease State, Federal or Fee	Lease No. NM14847
Location Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line Section <u>29</u> Township <u>17-S</u> Range <u>29-E</u> , NMPM, <u>Eddy</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Phillips Petroleum</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, Texas 79762</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook, Odessa, Texas 79762</u>	
Well produces oil or liquids, location of tanks.	Unit <u>N</u> Sec. <u>29</u> Twp. <u>17</u> Rge. <u>29</u>	Is gas actually connected? <u>yes</u> When? <u>8-15-85</u>

If production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
<input checked="" type="checkbox"/> Spudded								
Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Productions (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			<u>Part ID-2</u>
			<u>12-6-91</u>
			<u>shy up</u>

TEST DATA AND REQUEST FOR ALLOWABLE

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.)

First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Depth of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

AS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Flowing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Arvin Kinnibrugh
Signature
Arvin Kinnibrugh Vice President
Printed Name
11-14-91 (505) 677-2262
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 3 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.