

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

no. of copies required	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator

Petroleum Exploration Co., Inc.

Address

P.O. Box 809, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

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 Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/> Condensate <input type="checkbox"/>

Other (Please explain)

Request Test Allowable ~~of 80~~  
~~barrels per day~~ 2000If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease State, Federal or Fee	Case No.
Siete- Federal	4	Siete - San Andres	Federal	NM 06770

Location

Unit Letter A : 990' Feet From The North Line and 660' Feet From The East

Line of Section 17 Township 8-S Range 31-E NMPM Chaves

County

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate	(Give address to which approved copy of this form is to be sent)
Navajo Crude Oil Purchasing Company	P.O. Drawer 175, Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas or Dry Gas	(Give address to which approved copy of the form is to be sent)

If well produces oil or liquids,  
give location of tanks.

Unit	Sec.	Twp.	Age.
	17	8-S	31-E

Is gas actually connected?	When
No	

If this 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'
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
3/13/84	3/26/84	3844'	3792'					
Elevations (DF, RSB, HT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4198' GR, 4208' KB	Siete- San Andres	3676.5'	3647'					
Perforations			Depth Casing Shoe					
3676.5' - 3737' with 22 Shots								

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8-5/8"	1123'	450 sks.
7-7/8"	4 1/2"	3832'	350 sks.
	2-3/8"	3647'	

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 test allowable for this depth or be for full 24 hours)

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

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Rbbls. Condensate/MCF	Gravity of Condensate
Testing Method (prime, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

## 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.

## OIL CONSERVATION DIVISION

APPROVED MAR 30 1984 19BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

TITLE

This form is to be filed in compliance with RULE 1104.

If this is request for allowable for a newly drilled or deepened  
well, this form must be accompanied by a tabulation of the deviation  
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allow-  
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of ownership,  
well name or number, or transporter, or other such change of condition.Wesley Bogdan  
(Signature)J. Sexton  
(Title)3/26/84  
(Date)

RECEIVED  
MAR 27 1984  
O.C.D.  
HOBBS OFFICE