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Proprietary District Office
SPECIAL
P. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

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

SPECIAL
O. Drawer DD, Artesia, NM 88210
SPECIAL
AA Rio Brazos Rd., Aztec, NM 87410

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 Santa Fe Energy Operating Partners, L.P.		Well API No. 30-025-29617
Address 550 W. Texas, Suite 1330, Midland, Texas 79701		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" 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 _____ THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sprinkle Federal	Well No. 4	Pool Name, including Formation Undesignated Delaware	Kind of Lease State, <u>Federal</u> or Fee	Lease No. NM-40452
Location Unit Letter <u>F</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line Section <u>26</u> Township <u>18S</u> Range <u>32E</u> , NMPM, Lea 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"/> Texaco Trading and Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6196, Midland, Texas 79711	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GPM	Address (Give address to which approved copy of this form is to be sent) 4044 Penbrook, Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 26
	Twp. 18S	Rge. 32E
	Is gas actually connected? Yes	When? June 5, 1993

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	Workover	Deepen	Plug Back X	Same Res'v	Diff Res'v
Date Spudded 1-28-87	Date Compl. Ready to Prod. 6-3-93		Total Depth 9700'		P.B.T.D. 6890'			
Elevations (DF, RKB, RT, GR, etc.) 3748.8' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 5626'		Tubing Depth 5711'			
Perforations 5626'-5638' (52 holes)					Depth Casing Shoe 9700'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		353'		370 sx			
12-1/4"	8-5/8"		2810'		1050 sx			
7-7/8"	5-1/2"		9700'		900 sx			
	2-7/8"		5711'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

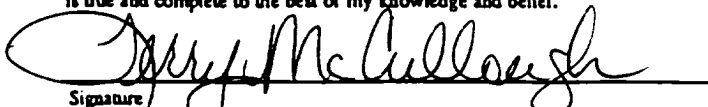
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank 5-29-93	Date of Test 6-10-93	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure N/A	Casing Pressure 65	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 25	Water - Bbls. 65	Gas - MCF 51

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, 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
Terry McCullough, Sr. Production Clerk
Printed Name
June 10, 1993
Date
915/687-3551
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 14 1993
By Paul Kantz
Orig. Signed by
Geologist
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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.