

WELL: SUN FEDERAL COM #1

DATE: 10/19/92

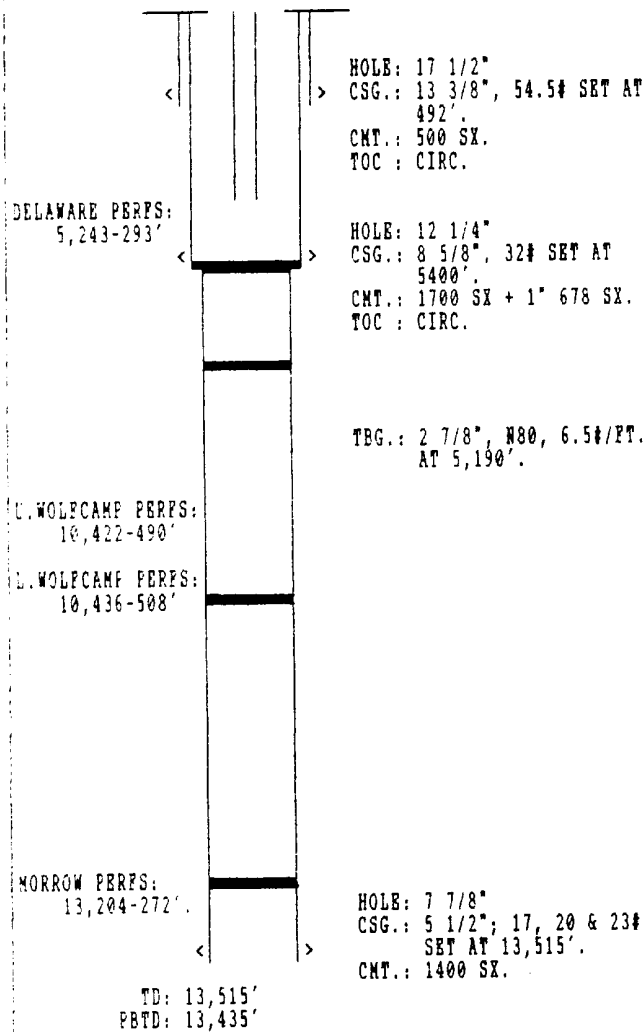
LOCATION: 1,650' FNL & 1,980' FWL
UNIT F, SEC. 26, T18S, R33E
COUNTY, STATE: LEA, NEW MEXICO

FIELD: SUN CORBIN
KB ELEV: 3,846.4'
GR ELEV: 3,825.4'

OPERATOR: SPEC (FORMERLY MANZANO)
API NO.: 30-025-30268
FILE: SFC#1.WBD

WELLBORE DIAGRAM

PULLING/WORKOVER HISTORY



DATE	DESCRIPTION
06/88	INITIAL COMPLETION: 13,204-272' (MORROW) W/ 2 SPF. ACIDIZE W/ 2000 GAL. 10% NEFE. IPP: 844 MCF, 27 BC & 0 BW ON 13/64" CHOKE. FTP = 2798#.
07/89	RE-ACIDIZE WITH 4,000 GAL. 7.5% ACID, 150 MCF NITROGEN WITH 125 BALL SEALERS. FLOWED BACK AT 3500#.
07/91	SET CIBP + 25' CMT. AT 13,150+/- . PERF WOLF CAMP FROM 10,436-548. ACIDIZE W/ 3000 GAL 20% NEFE W/ 72 BALLS. SET RETAINER @ 10,508 AND PMP. 200 SX "H". DO CMT. & TESTED PERFS 10,530-40. SET PACKER @ 10,308 AND PMP. 100 SX "H". PERF 10,530-47 WITH 2 SPF. ACIDIZE W/ 750 GAL. 15% NEFE. NO SHOW. SET CIBP @ 10,494 & PERF 10,422-490. SWAB TEST W/ NO SHOW. PREP TO TA.
09/91	SET CIBP @ 7500. PULL AND SALVAGE 5400' 5 1/2" CSG. TOP OF 5 1/2" STUB @ 5370. SET 50 SX PLUG @ 5420-5250. PERF DELAWARE FROM 5,243-56' AND 5,270-93' WITH 1 SPF. ACIDIZE WITH 2000 GAL. 15% NEFE & 70 BALLS. NO SHOW. FRAC THROUGH TBG. W/ 493 BBLs. VIKING GEL AND 37,000# 16/30 SAND. SWAB 10' FREE OIL ON FIRST RUN. REST OF SWAB RUNS RECOVERED 1 1/2 OIL CUT FLUID. PREP TO TA.

RECEIVED
OCT 23 1992
OCD HOBBS OFFICE

Memo:

10-19-92

From

EVELYN DOWNS
Oil Conservation Staff
Specialist

To Janet A. Royal
Santa Fe Expl.

Re: Sun Federal Com #1-F 26-18-33

We have approved the Change of
Opis for the above referenced well.
However, the morrow has been
abandoned w/ BP & the Delaware
perforated but no Completion
was ever filed or allowable
assigned to Delaware.
Please advise your plans for
this well.

Evelyn Downs

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Santa Fe Exploration Company		Well API No. 30-025-30268
Address P. O. Box 1136, Roswell, New Mexico 88202-1136		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <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"/>
If change of operator give name and address of previous operator Manzano Oil Corporation, P. O. Box 2107, Roswell, NM 88202		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sun Federal Com	Well No. 1	Pool Name, including Formation South Corbin <i>Morrow</i>	Kind of Lease State, Federal or Foreign	Lease No. NM-57534
Location Unit Letter <u>F</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>26</u> Township <u>18 South</u> Range <u>33 East</u> , NMPM, Lea County				

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) P.O. Box 1861, Midland, TX 79702-9970					
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) 10 Desta Drive, Suite 627, Midland, TX 79705					
If well produces oil or liquids, give location of tanks.	Unit <u>F</u>	Sec. <u>26</u>	Twp. <u>18S</u>	Rge. <u>33E</u>	Is gas actually connected? Yes	When? 9/24/88

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	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	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

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, 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.

Janet A. Royal
Signature

Janet A. Royal

Production Analyst

Printed Name

October 16, 1992

(505) 623-2733

Date

Telephone No.

OIL CONSERVATION DIVISION

OCT 18 1992

Date Approved

Signed by
By *Paul Kanta*
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.