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Appropriate District Office  
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1000 Rio Urazos 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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

**I. OPERATOR**

Operator Santa Fe Energy Operating Partners, L.P.	Well API No. 30-025-31517
Address 550 W. Texas, Suite 1330, Midland, Texas 79701	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <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**

Lease Name Kachina 5 Federal	Well No. 3	Pool Name, Including Formation Corbin Wolfcamp, South	Kind of Lease State <u>Federal</u> or Fee	Lease No. LC-062391
Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>5</u> Township <u>18S</u> Range <u>33E</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"/> Texas-New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, New Mexico 88240			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	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 0	Sec. 5	Twp. 18S	Rge. 33E
Is gas actually connected?		When ?		
Yes		4-30-92		

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
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded 1-31-92	Date Compl. Ready to Prod. 4-26-92		Total Depth 11,500'		P.B.T.D. 11,310'			
Elevations (DF, RKB, RT, GR, etc.) 3972' GR	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 11,220'		Tubing Depth 11,005'			
Perforations 11,220'-11,263' (88 holes)					Depth Casing Shoe 11,500'			

**TUBING, CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	478'	500 sx Cl C
12-1/4"	8-5/8"	3100'	1650 sx Lite & Cl C
7"	5-1/2"	11,500'	800 sx Cl H

**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 4-26-92	Date of Test 5-3-92	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 390	Casing Pressure pkr	Choke Size 23/64"
Actual Prod. During Test	Oil - Bbls. 456	Water - Bbls. 1	Gas - MCF 502

**GAS WELL**

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

Terry McCullough  
Signature  
Terry McCullough, Sr. Production Clerk  
Printed Name  
May 4, 1992  
Date  
915/687-3551  
Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved MAY 06 '92

By Paul Kautz  
Original 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.