 Submit 5 Corres Appropriate Drunct Office DISTP:/CT 1 P.O. Box 1980, Hobbs, NM 88240	State of New Mexico Energy, Minerals and Natural Resources Depart						Form C-104	
DISTRICT II P.O. Drawer DD, Anena, NM 88210 DISTRICT III	OIL CONSERVATION DIVISI P.O. Box 2088 Santa Fe, New Mexico 87504-2088						BY DOLION OF LEGE	
IUU KIO BIRZOS R.C., Azzec, NM 87410 I. Operator	REQUEST FO	R ALLOWABL						
Santa Fe Energy Operating Partners, L.P.				Well API			No. 30-025-31802	
550 W. Texas, Su:	ite 1330, Mid	land, Texas						
Reason(s) for Filing (Check proper bax) New Well	Change in	Transporter of:	U Other	(Please explain)				
Recompletion Change in Operator	Oil	Dry Gas			this well	must be	asinghead gas from obtained from the	
If change of operator give name and address of previous operator	THIS WELL	HAS BEEN PLAC	ED IN THE	POOL	- OUREAU-	de land Ma	NAGEMENT (BLM)	
II. DESCRIPTION OF WELL	AND DBASED THI							
Lease Name Kachina 8 Federal	Well No. 3	Pool Name, Includin South Cor	bin Wolf	(172) Camp :	Kind of State of	Lesse ederal br Fee	Lease No.	
Location Unit LetterG	: 1980	Feet From TheN				From The	NM-84731	
Section 8 Townshi	p 185	Range 33E		IPM.	Foe	Lea	Lin¢	
III. DESIGNATION OF TRAN		IL AND NATU	RAL GAS				County	
Name of Authonzed Transporter of Oil Texas-New Mexico Pipe	T or Conder		Address (Give	address to white	ch approved	copy of this for	m is to be sent)	
Name of Authonzed Transporter of Casin				P. O. Box 2528, Hobbs, Address (Give address to which approved cop			NM 88240	
Conoco, Inc. If well produces oil or liquids,		<u>10 Des</u>	<u>10 Desta Drive, Suite</u>			627, Midland, TX 79705		
give location of tanks.	Unit Sec.	185 33E	Is gas actually No	connected?	When	?	2, 1993	
If this production is commingled with that IV. COMPLETION DATA	from any other lease or	pool, give comming	ing onier numi	еп				
Designate Type of Completion			X	Workover	Deepen	Plug Back	Same Res'v Dill Res'v	
Date Spudded 11-29-92	Date Compl. Ready 1 2-6-9		Total Depth	11 5251		P.B.T.D.		
Elevauons (DF, RKB, RT, GR, etc.)	Name of Producing F	Top Oil/Gas	11,525' Top Oil/Gae Pay			11,290' Tubing Depth		
3895.4' GR Perforations	Wolfcam	<u> </u>	11,157'			11,022' Depth Casing Shoe		
11,157'-11,229					11,525'			
		CEMENTING RECORD						
HOLE SIZE		CASING & TUBING SIZE		<u>DEPTH SET</u> 475'			SACKS CEMENT	
12-1/4"		8-5/8"		3,108'			500 sx C - circ. 1400 sx C + Lite (circ	
7-7/8"	5-1/2	11,			1400 sx			
V. TEST DATA AND REQUE	2-7/8 ST FOR ALLOW	ABLE	11,0)22'	· _ ·			
OIL WELL (Test must be after	recovery of ioial volum		i be equal to a	exceed top allo	mable for thi	s depih or be f	or full 24 hours)	
Date First New Oil Run To Tank 2-6-93	Date of Test	(0 0		ethod (Flow, pu	mp, gas lifi, i	ilc.)		
Length of Test	-2- Tubing Pressure	2-6-93		Flowing			Choke Size	
20.5 hrs./	260		pkr		22-25/64"			
Actual Prod. During Test	Oil - Bbls.	151/528	Water - Bbli	. 0		Gas-MCF	404/473	
GAS WELL							404/ 7/ 3	
Actual Prod. Test - MCF/D	Length of Test		Bblin Coude	HE MMCF		Gravity of C	Condemanta	
	Tubing Pressure (Shut-in)							
Testing Method (puot, back pr.)	Tuding Pressure (Sh	מ-ש)	Casing Pres.	are (Shut-in)		Choke Size		
VI. OPERATOR CERTIFIC I hereby certify that the rules and reg	ulations of the Oil Cons	ervation			ISERV	ATION	DIVISION	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Date Approved			<u>ina</u> a <u>1</u> 1993	
Signature Signature							AION	
Terry McCullough, Sr. Production Clerk Proted Name Tide				By <u>ORGER SEAL</u> ATON Title				
Feb. 25, 1993 Date	<u>915/687-1</u> T	3551 elephone No.		·		······		
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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.