CONCIDENTIAL

STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

BISTRIBUTH		
BANTA PE		
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V.8.8.8.		
LAND OFFICE		
TRANSPORTER	HL	
OPENATOR		
PROBATION OF	HCE	

I.

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Siete Oil & G	as Corporation			
Address P. O. Box 25	523, Roswell, NM 88201			<u> </u>
Reeson(s) for filing (Check pro	oper box)	Other (Please exp	ilain)	
X New Weil Recompletion Chance in Ownership	Change in Transporter of: X Oil Casingheat Gee	Dry Gas	b) revel to there coslegited to the coslegite	rom the
and address of previous own	NUTIFE INIS UFFICE	THE POOL		
II. DESCRIPTION OF WE	Well No. Pool Name, Includi		nd of Lease	Lease No.
Louis Name Conoco Federal	well No. Poor loanet instant		ne, Federal or Fee Federal	NM-9017
Location	330 Feet From The South	_Line and330	Feet From The West	
Line of Section 18	Township 185 Range	<u>32</u> е , ммрм,	Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of OII 🔯 or Condensate					Address (Give address to which approved copy of this form is to be sent)			,		
Conoco Inc.			- Dev Ge	<u> </u>	P. O. BO	x 2587	, Hobbs,	NM 8824		,
Name of Authorized Transporter of Casinghead Cos K and any one Same										
Same If well produces oil or liquids,	Unit	Sec.	Twp.	1	Is gas actually NO	connected?		8/1/86		
give location of tanks.	: M	18	1 1105	L J Z L						

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

<u>/Supervisor</u> Production (Tule) 7/17/86 (Date)

OIL CONSERVATION	19
ORIGINAL SIGNED BY JERRY SEXTON	
DISTRICT I SUPERVISOR	

AP

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

If this is a 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 allowable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner, well same or number, or transporten or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

Porm C-104 Revised 10-01-78 Pormat 08-01-83 Page 2

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IV. COMPLETION DATA

esignate Type of Comp		X		New Well X	Workover	Deepen	Plug Beck	Same Restv.	Dill Ree
	Dete Compi	. Ready to Pr	rod.	Tetel Depth	· · · · · · · · · · · · · · · · · · ·	<u> </u>	P.8.T.D.		
6/21/86				550	00'			457'	
tions (DF. RKB. RT. GR. et	te.; Name of Pro	ducing Form	etion	Top Oll/Ge	Per				
<u>3724' GR</u>	Del	aware		5190'	,		Tubing Dep		
retions				1 0 1 9 0				.36'	
<u> 5190' - 5221'</u>	- 20 Perfs						Depth Casin	q Shoe	
		TUBING, C	ASING, ANI	CEMENTIN	G RECORD				
HOLESIZE	CASIN	G & TUBIN	GSIZE		DEPTH SET				
124"		5/8"			69.46 KB			CKS CEMEN	
7.7/8"	5	1/2"			the second s	_	250sx Hi	.gh Early	II+2%
		÷/.€		55	00 ' KB		500sx "C	2% CaC	1 ² , 50
		3/8"					"C" 50/5	0 poz+2%	
51 "					36' ·				-u-u-L

OIL WELL able for this depth or be for full 24 hours)

7/14/86	7/15/86	Producing Method (Flow, pump, Flow	gas lift, etc.)
Length of Test 24 hrs.	Tubing Pressure 140 PSI	Casing Pressure	Chate Size
Actual Pred. During Test 215	Oli - Bhis.	680 PSI Water - Bbis.	18/64 Gee-MCF
215	141	21	est, 150

GAS WELL

Astual Pred. Test-MCF/D					
	Longth of Tost	Bhis. Contononto/MACF	Grevity of Condensate		
Touting Mothed (piset, back pr.)					
iperation (press, or proj	Tubing Pressure (Shut-in)	Casing Pressure (Strut-in)	Cheke Size		

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