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Appropriate District Office
DISTRICT |
P.O. 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

OIL CONSERVATION DIVISION

P.O. Drawer DD, Artesia, NM 88210	_	P.O. Box 2088									
DISTRICT III	_	Sa	anta Fe	, New M	lexico 875	04-2088					
1000 Rio Brazos Rd., Aziec, NM 87410	REQ	JEST F	OR AL	TOWA	BLE AND	AUTHOR	IZATIO	NC			
1.					L AND NA						
Operator								Well API No.			
Siete Oil & Gas Cor	<u>poration</u>	n									
Address											
P. O. Box 2523, Ros Reason(s) for Filing (Check proper box)	well, N	4 8820	01	 		(8)					
New Well	,	Change is	. T		∐ Oth	es (Please exp	Nain)				
Recompletion	Oil		Dry Ga								
Change in Operator	Casinghea		Conden								
If change of operator give name									······		
and address of previous operator									 -		
IL DESCRIPTION OF WELL	L AND LE	ASE									
Lease Name		Well No.	1		ing Formation	,		Kind of Lease		ease No.	
Inca Federal		4	Yat	es-7R-	·Queen-Gr	ayburg	13	KARCK Federal MOPA	NM-	9016	
Location				_							
Unit Letter	: <u> 760</u>	0,	Foot Fro	m The _/	lorth Lin	e and4	<u> 30'</u>	Feet From The	West	Line	
Section 19 Towns	L'- 10C		_	20)F						
Section 19 Towns	hip 18S		Range	32	E N	MPM,	<u>L</u>	<u>ea</u>		County	
III. DESIGNATION OF TRA	NSPORTE	R OF O	II. ANI	NATE	RAT. GAS						
Name of Authorized Transporter of Oil		or Conder				e address to w	hick app	oved copy of this f	orm is to be a	ent)	
Pride Pipeline Comp	Pride Pipeline Company				1				ne. TX 79604		
Name of Authorized Transporter of Casi					Address (Give address to which approved						
CANACA In	ر ر									·	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.		is gas actually	connected?	1	Vhen ?			
	D	19	185		<u> </u>		1_				
f this production is commingled with the	t from any oth	er lease or	pool, give	comming	ling order numb	er:					
V. COMPLETION DATA		laumi u		—	1					_,	
Designate Type of Completion	1 - (X)	Oil Well	1 6	as Well	New Well	Workover	Doep	en Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Comp	i. Ready to	Prod.		Total Depth		.1	P.B.T.D.	L	<u> </u>	
•		•				_					
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	roducing Fo	ormation		Top Oil/Gas Pay			Tubing Dept	Tubing Depth		
Perforations			.=					Depth Casin	g Shoe		
											
					CEMENTING RECORD						
HOLE SIZE	CAS	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
	+										
		··				·	 				
· · · · · · · · · · · · · · · · · · ·	 										
. TEST DATA AND REQUE	ST FOR A	LLOWA	BLE		1						
OIL WELL (Test must be after				and must	be equal to or i	exceed top alle	owable fo	r this depth or be f	or full 24 hour	rs.)	
late First New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)						
	·				,						
ragth of Test Tubing Pressure					Casing Pressure			Choke Size	Choke Size		
								C 1/0			
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF			
GAS WELL											
Actual Prod. Test - MCF/D	ं दर्श			Bbls. Condensate/MMCF			Gravity of C	Gravity of Condensate			
	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			0.5		···········	
sting Method (pilot, back pr.)	I doing Fres	ente (20nt-	m)		Casing Pressur	s (2001-10)		Choke Size			
T ADED LEAD CONTROL	1	001			 			<u> </u>		 	
I. OPERATOR CERTIFIC				E		II CON	ISER	VATION I	JIVISIO	N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above							102.		FEB 2 0 1990		
is true and complete to the best of my					Data	A		FE	RZU	Iyyu	
m-	<i>(</i>			ĺ	Date	Approve	u				
Melenda K. D	ukna)					^	on Ci:			
Signature					By Orig. Signed to Paul Kautz						
Melinda K. Hickman Production Clerk					Geologist						
2/16/90	בח	5-622-	Title 2202		Title_						
			hone No.								

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.

505-622-2202 Telephone No.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.