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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

Operator Santa Fe Energy Operating Partners, L.P.		Well API No. 30-025-30719
Address 500 W. Illinois, Suite 500, Midland, Texas 79701		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> 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 Shinnery 14 Federal	Well No. 5	Pool Name, Including Formation Upper Bone Spring	Kind of Lease State, Federal or Fee	Lease No. NM 40452
Location Unit Letter H : 2310 Feet From The North Line and 660 Feet From The East Line Section 14 Township 18S Range 32E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Texaco Trading and Transportation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6196, Midland, Texas 79711
Name of Authorized Transporter of Casinghead Gas 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 H Sec. 14 Twp. 18S Rge. 32E	Is gas actually connected? When? Yes 12-14-89

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 X Gas Well New Well Workover Deepen Plug Back Same Res'v Diff Res'v	Date Spudded 10-31-89	Date Compl. Ready to Prod. 12-6-89	Total Depth 8782'	P.B.T.D. 8753'
Elevations (DF, RKB, RT, GR, etc.) 3818.9' GR	Name of Producing Formation Bone Spring	Top Oil/Gas Pay 8660'	Tubing Depth 8706'	Depth Casing Shoe 8781'
Perforations 8660'-8694' (35 holes)				
TUBING, CASING AND CEMENTING RECORD				
HOLE SIZE 17-1/2" 12-1/4" 7-7/8"	CASING & TUBING SIZE 13-3/8" 8-5/8" 5-1/2" 2-7/8"	DEPTH SET 410' 2744' 8781' 8706'	SACKS CEMENT 500 sx "C" (circ) 850 sx 35/65 poz +450 sx C 695 sx PSL "H" + 681 sx H	

V. TEST DATA AND REQUEST FOR ALLOWABLE

(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 12-9-89	Date of Test 12-17-89	Producing Method (Flow, pump, gas lift, etc.) Pumping - 2" x 1 1/4" x 26' Insert Pump	
Length of Test 23.5 hrs	Tubing Pressure -	Casing Pressure 40	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 156	Water - Bbls. 88	Gas- MCF 130 (calc)

GAS WELL

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

Signature
Terry McCullough, Sr. Production Clerk
Printed Name
12/19/89
Date
915/687-3551
Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 22 1989
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
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.

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DEC 21 1989

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