Submit 5 Cotres
Appropriate Distinct Office
DISTRICT I
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. Box 2088

DISTRICT II	OIL (TION D	IVISIO	N		Mt Bottor	n of Page	
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	S		P.O. Bo New Me	ox 2088 exico 8750	4 <u>-</u> 2088					
1000 Rio Brazos Rd., Aziec, NM 87410										
I.	REQUEST F	OH ALI ANSPO	LOWAE	LE AND A AND NAT	UTHORI	ZATION				
Operator					ONAL GA	Vell A	Pl No.			
Santa Fe Energy Operating Partners, L.P.					30-025-308			59		
500 W. Illinois, Suite 500, Midland, Texa					1		-			
Ressou(s) for riling (Check proper box)					ı τ (Please expla	(וינד	 			
New Well XX		in Transport			•	,				
Change in Operator	Oil Casinghead Gas	Dry Gas Condens								
If change of operator give name and address of previous operator	Table Car			<u> </u>						
•		-	HAS BEL	BEEN PLAC OW. IP YOU	ED IN THE	FOOL				
II. DESCRIPTION OF WELL Lease Name	AND LEASE		THIS OF			DNOUG				
Lease Name Well No. Pool Name, Including Corrienta 12 Federal 1 Hard, West C					Corbin Delaware State Federal of			Lease No.		
Location				COLDIN D	eraware			NM_	22085	
Unit LetterN	_:860	Feet Fro	m The _S	outh Line	and198	30 Fe	et From The _	West	Line	
Section 12 Townshi	ip_ 18S	Range	32E	10	AFM.		_		Line	
III DECICALITYON OF THE					arm,		Lea		County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		OIL AND	NATU	RAL GAS						
Texaco Trading and Tr	עאַן cansportation			P O B	ov 6106	hich approved	copy of this fo	orm is to be se	nr)	
Name of Authorized Transporter of Casin	ghead Gas X	or Dry C		Address (Give	ox 6196,	MILGIAN	1, Texas	5 79711 orm is to be se	-41	
Conoco, Inc. If well produces oil or liquids,	lu-a la		,	10 Dest	a Drive,	Suite	527, Mid	land, T	79705	
give location of tanks.	Unit Sec.	Тwp. 1185	Rge. 32E	is gas actually	connected?	When	?		- 15105	
If this production is commingled with that		r pool, give	comming	ing order numb	s er:		6-6	· - 90		
IV. COMPLETION DATA								·		
Designate Type of Completion	- (X) Oil We	il G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready	to Prod.		X Total Depth		<u></u>	DDTD		<u></u>	
4-30-90	7-7-90				9404'		P.B.T.D.	9361'		
Elevations (DF, RKB, RT, GR, etc.) 3850.3' GR	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations	<u>Delaware</u>	2		L	4966'		Dowl Con	5021'		
4966'-4987' (36 hol							Depth Casin	g snoe 9404†		
HOLE SIZE	TUBINO	G, CASIN	G AND	CEMENTIN	NG RECOR	.D	<u>'</u>			
17-1/2 "		CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12-1/4"	8-5/8"			348' 2824'			370 sx C 1000 sx lite + 200 sx C			
7-7/8"	5-1/2"	17#		-	940					
V. TEST DATA AND REQUE	ST FOR ALLOW	/ADI E				·	040 5	u TILE	t 620 sx	
OIL WELL (Test must be after t	recovery of total volum	e of load oil	l and musi	be equal to or	exceed ion all	aumble (ar et:				
Date First New Oil Run To Tank	Date of Test			Producing Me	thod (Flow, pr	ump, gas lift, e	ic.)	or full 24 hour	·s.)	
6-13-90 Length of Test	7-	14-90	-	Pumpin	g		•			
24 hours	Tubing Pressure	MA		Casing Pressu	50		Choke Size			
Actual Prod. During Test	Oil - Bbls.	NIA		Water - Bhis			Gas- MCF	N/A_		
		156	_		111		OLS MC	56		
GAS WELL		•								
Actual Prod. Test - MCF/D	Length of Test	· · · · · · · · · · · · · · · · · · ·		Bbls. Conden	ule/MMCF	-	Gravity of C	condensate		
Testing Method (puot, back pr.)	Tubing Pressure (Sh	117-10)		C						
(Tuoing Trescie (Sir	ur-m)		Casing Pressu	re (Shut-in)		Choke Size			
VI. OPERATOR CERTIFIC	ATE OF COM	PLIAN	CE.	<u> </u>			1			
I hereby certify that the rules and regul	lations of the Oil Cons	envation			DIL CON	ISERV	I NOITA	DIVISIO	N	
Division have been complied with and is true and complete to the best of my	that the information grand helief	ven above		11				1.00		
A. M	1 11	0		Date	Approve	d		1 2	<u> </u>	
Stry VCI	Jullous								,	
Signature Terry McCullough,	Sr. Produced	OD C14	rk	By_			•		STON	
Photed Name		Title		Title			•	(A. 1936년) [설 :	-	
July 18, 1990 Date	<u>915/687-3</u>			ll rille.						
	1 c	lephone No	,	(1						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for rewly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- 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.