

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Santa Fe Energy Operating Partners, L.P.		Well APJ No. 50-025-31052
Address 550 W. Texas, Suite 1330, 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 Corrienta 12 Federal	Well No. 2	Pool Name, including Formation Unit. West Corbin Delaware	Kind of Lease State (Federal) or Fee	Lease No. NM-22085
Location Unit Letter M : 330 Feet From The South Line and 660 Feet From The West Line Section 12 Township 18S Range 32E, NMPM, Lea County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texaco Trading & Transportation, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6196, Midland, TX 79711	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> 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 M	Sec. 12
	Twp. 18S	Rge. 32E
	Is gas actually connected? No When? Est. 2-20-91	

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-12-90	Date Compl. Ready to Prod. 1-19-91		Total Depth 5125'		P.B.T.D. 5069'			
Elevations (DF, RKB, RT, GR, etc.) 3847' GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 4938'		Tubing Depth 5022'			
Perforations 4938'-5010' (14 holes)					Depth Casing Shoe 5125'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12-1/4"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 404'		SACKS CEMENT 300 sx Cl C (circ)			
7-7/8"	5-1/2"		5125'		1200 sx Cl C + POZ			

### V. TEST DATA AND REQUEST FOR ALLOWABLE

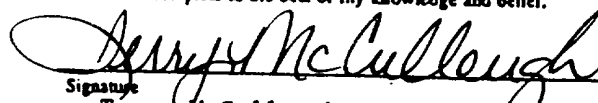
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank 1-21-91	Date of Test 2-3-91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure 50	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 51	Water - Bbls. 219	Gas - MCF 76

### 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  
Feb. 8, 1991  
Date  
915/687-3551  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved \_\_\_\_\_  
By \_\_\_\_\_  
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.

WELL NAME WEE Corrienta "12" Federal No. 2  
 LOCATION 330' FSL & 660' FWL, Section 12, 18S, 32E, Lea County, New Mexico  
 OPERATOR Santa Fe Energy Operating Partners, L.P.  
 DRILLING CONTRACTOR United Drilling, Inc.

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above described well and had conducted deviation tests and obtained the following results:

<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>
<u>1/2° 403'</u>	<u>3/4° 4477'</u>	<u>                    </u>
<u>1° 1000'</u>	<u>3/4° 5103'</u>	<u>                    </u>
<u>1-1/2° 1500'</u>	<u>                    </u>	<u>                    </u>
<u>1-1/4° 2173'</u>	<u>                    </u>	<u>                    </u>
<u>1-1/4° 2547'</u>	<u>                    </u>	<u>                    </u>
<u>1-1/2° 3044'</u>	<u>                    </u>	<u>                    </u>
<u>1° 3605'</u>	<u>                    </u>	<u>                    </u>
<u>1-1/2° 4043'</u>	<u>                    </u>	<u>                    </u>

Drilling Contractor United Drilling, Inc.

By: G. M. Gibbs

Title: Business Manager

Subscribed and sworn to before me this 29<sup>th</sup> day of December, 1990.

Karna Tankersley  
 Notary Public

My Commission Expires: 9-25-91 Chavez New Mexico  
 County State