### STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

DISTRIBUTI	0H	
SANTA PE		
FILE		
W.8.0.4.		<u> </u>
LAND OFFICE		
TAANSPORTER	OIL	
	-	
OPERATOR		
PRORATION OFT	ICE	

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

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

Operator				1	
Siete Oil & Gas Corpo	ration				
Address					
P. O. Box 2523	Roswell, New	Mexico 88202		-	
Rouson(s) for filing (Check proper box)	· · · · · · · · · · · · · · · · · · ·	Other (Pleas	oproval to flare casinghead	~~~	
New Well	Change in Transporter of:		is well must be obtained fro	gas from	
- Accemplation	u u	ry Gas Bi	JREAU OF LAND MANAGEMENT (	n (1 ling) Semn	
Change in Ownership	Casingheet Gas	andensate		5 <b>6</b>	
If change of ownership give name and eddress of previous owner II. DESCRIPTION OF WELL ANI	THIS WELL HAS BEEN PLACE DESIGNATED BELOW. IF YOU NOTIFY THIS OFFICE	DO NUT CONCUR	1/88		
Leese Name	Well No. Pool Name, Including	ormation	Kind of Laase	Legae No.	
Kachina Federal	1 Wildcat	Delaware	State, Federal or Fee Federal	NM 58820	
Location					
Unit Letter E : 198	0 Feet From The North Li	ne and <u>660</u>	Feet From The West		
Line of Section 6 Tow	nship 20 South Range 3	2 East , NMPN	4, Lea	County	
IL DESIGNATION OF TRANSP					
Name of Authorized Transporter of Oll 🐯 or Condensate 🗋 Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum		Box 791 M			
Name of Authorized Transporter of Cas	inghead Gas 📄 or Dry Gas 📑	Address (Give address	to which approved copy of this form is	to be sentj	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connect	ed? When		
give location of tanks.	E 6 208 32E	No	(TSTM)		

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.

1 D Quiti
(Signeture)
V. P. Drilling and Production
(Tule)
November 9, 1987
(Date)

	CONSERVATIO		
APPROVED	<u>NOV 19</u>	1987	18
	GINAL SIGNED BY		

TITLE

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

DISTRICT I SUPERVISOR

If this is a request for allowably 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 sllow-able on new and recompleted wells.

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

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

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# IV. COMPLETION DATA

	· ( <b>X</b> )	OIL Well	Ges Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Ree
Designate Type of Complete	$10n \rightarrow (\lambda)$	¦ X		x	•	1	1	1	1
Otto Spuddod	Dete Comp	I. Ready to P	rod.	Totel Depti	1		P.E.T.D.	4	<b>.</b>
9/1/87		1/1/87		746	01		-	'369'	
leveliene (DF, RKB, RT. GR, etc.,	Name of Pr	roducing Form	nation	Top Oll/Ge	s Pay	ويبري بمستنفاة ويجدر أسبر أشفا	Tubing Dep	Lh	
3494 GR	Dela	ware		583	7'			205'	
Arierations.					·····		Deuth Cash	y Shoe	
<u>7221' - 7288' (16 s</u>	hots) 611	4' - 613	34 (16 sh	ots) 583	7' - 584	2 (6 sho	cs)	7459'	
			CASING, AN						•
HOLESIZE	CASI	NG & TUBI	NG SIZE		DEPTH SE	T	\$/	CKS CEMEN	IT
175	1	3 3/8			828	يردور فللمستبلية بالمستعد	780 sk	s. circu	lated
124		8 5/8			2474		800 sk	s. circu	lated
7 7/8		7"			4149		200 sk	s.	
6 1/8	1	45		1	7459		950 al	s. circu	1

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of tetal volume of lead oil and must be equal to ar exceed top allow OIL WELL able for this depth or be for full 24 houre)

Date First New Oll Run To Tanks	Dute of Teet	Producting Method (Flow, pr	mp, gas life, sec.)		
10/16/87	10/19/87	Pumping (Trico	Pumping (Trico 320)		
Length of Tool	Tubing Pressure	Casing Processo	Cheke Size		
24 hrs.	n/a	n/a	n/a		
Astuni Pred. During Test	Oil-Bhis.	Water - Bbie.	Ges-MCP		
145	20	24	TSTM		

# GAS WELL

Actual Prod. Tool-MCF/D	Langth of Tost	Bhis. Condensate/hb/CF	Gurrity of Condensate
N/A			
Tooling Mothod (pisot, back pr.)	Tubing Pressure ( Shut-12 )	Casing Pressure (Shut-in)	Choke Size

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RECEIVED NOV101981 NOV201981 HOBES OFFICE

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