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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. 30-025-30757
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 Bilbrey 21 Fed Com	Well No. 1	Pool Name, Including Formation Bilbrey Morrow	Kind of Lease State, Federal or Fee	Lease No. NM-61600
Location Unit Letter 0 : 1980 Feet From The East Line and 660 Feet From The South Line Section 21 Township 21S Range 32E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 21	Twp. 21S	Rge. 32E	Is gas actually connected? No	When?
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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 12-30-89	Date Compl. Ready to Prod. 3-24-90		Total Depth 14,801'		P.B.T.D. 14,606'			
Elevations (DF, RKB, RT, GR, etc.) 3685.6' GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 14,253'		Tubing Depth 14,068'			
Perforations 14,253'-14,349' (18 holes)					Depth Casing Shoe 12,100'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8"		634		700 sx "C"			
12-1/4	9-5/8"		4620		3600 sx PCL + 250 sx "C"			
8-1/2	7"		12,100		1200 sx 50/50 Poz			
6"	4-1/2" liner		11,754'-14,798'		400 sx "H"			

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)		2-3/8" Tubing at 14,068'	
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 90	Length of Test 4 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate --
Testing Method (puol, back pr.) back pressure	Tubing Pressure (Shut-in) 4817	Casing Pressure (Shut-in) pkc	Choke Size variable

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  
Aug. 23, 1990  
Date  
915/687-3551  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 14 '92

By ORIGINAL SIGNED BY JERRY SEXTON

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.