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September 4, 1968

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	FILE /-	AND Effective 1-1-65				65	
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AN	ND NATURAL GA	AS RECE	IVED	
	LAND OFFICE						
	TRANSPORTER GAS				SEP 5	1968	
	OPERATOR /	SUMPAY DX	OIL CO.				
ı.	PRORATION OFFICE		DO MO.		0. 0		
	SUN OLD CO DX DIVISION SUN OLD COMPANY DEFICE						
	Address MARKET COMPANY DIVISION						
	- Program (Application of the Control of the Cont						
	Reason(s) for filing (Check proper box) New Mexico 88201 Other (Please explain)						
	New We!l	Change in Transporter of: OIL Dry Gas DALLAS, TEXAS 75201					
	Recompletion Oil Dry Gas DALLAS, 1EAAS /520] Change in Ownership X Casinghead Gas Condensate Commingled with Grayburg Jackson						
	and address of previous owner	Weier Drilling Company	- Box 716 - M	onahans, Texa	19756		
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including F	Formation	Kind of Lease	· · · · · · · · · · · · · · · · · · ·	Lease No.	
	V. L. Poster	2 Fren Seven-R	ivers*	State, Federal	or Fee Fed. LC-	- 049998 (a	
	Location						
	Unit Letter J; 165	O Feet From The South Li	ne and 2310	Feet From Th	he East		
	Line of Section 17 Tow	mship 17 Range	31 , N	мрм,	Eddy	County	
II.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	Address (Give addr	ess to which approve	ed copy of this form is	to be sent)	
		_	1			- = =:57/	
	Texas-New Mexico Pipeline Company Name of Authorized Transporter of Casinghead Gas or Dry Gas		Box 1510 - Midland, Texas Address (Give address to which approved copy of this form is to be sent)				
	Skelly Oil Company		Box 1650 Tules, Oklahome 1650				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually con	mected? When	n 6–60		
	give location of tanks.	G 17 17 31	Yes	order number: O	0-00 154		
	If this production is commingled wit COMPLETION DATA		give comminging	order number: 47			
	Designate Type of Completio	Oil Well Gas Well	New Well Worko	ver Deepen	Plug Back Same Re	s'v. Diff. Res'v.	
		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
	Date Spudded	Date Compt. Heady to Prod.					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
					Depth Casing Shoe		
	Perforations Depth Casing Snoe						
		TUBING, CASING, AND CEMENTING RECORD		CORD	· · · · · · · · · · · · · · · · · · ·		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
				•			
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be	after recovery of total	volume of load oil a	nd must be equal to or	exceed top allow-	
	OIL WELL	able for this d	Producing Method	hours) (Flow, pump, gas lift	, etc.)		
	Date First New Oil Run To Tanks		1 - and defined in the part is the sail		······································		
	Length of Test	Tubing Pressure	Casing Pressure		Choke Size		
			Dimension 2011		Gas - MCF		
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		G48 - MO1		
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)		Choke Size		
	. resumd Mannor (hmort peece but)	(GH46-ZH)		- •			
Vī	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION				
. . .			arn 1 0 1000				
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given			APPROVED SED 10 1900 , 19			
	above is true and complete to the best of my knowledge and belief.		BY W. a. Bressett				
	, mag	TITLE CM	TITLE ON AND GAS ASSPECTED				
	7/201		This form is to be filed in compliance with RULE 1104.				
	A. Make	75 45 - 10 - 6	realistic apparent for allowable for a newly drilled or despened				
	(Signi	R. D. Hill		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	District Administrativ		All section	ns of this form mus	it be filled out comp		
	(Til	All sections of this form must be filled out completely for allowable on new and recompleted wells.					

All sections of this form must be able on new and recompleted wells.

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

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