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	DISTRIBUTION	NEW MEXICO OU C	ONSERVATION COMMISSION			
	SANTA FE /			Form C-104		
	FILE	KEQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65		
	U.S.G.S.		AND			
		AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GRECEIVED		
	LAND OFFICE					
	TRANSPORTER OIL					
	GAS /			<b>AP</b> R 2 0 1970		
	OPERATOR /		<b>X</b>			
1.	PRORATION OFFICE		V	<b>5</b> 70 € 100 € 100 €		
	Operator	<del></del>		ADTITION		
	Sun Oil Company /			ARMISIA, OFFICE		
	Address			· · · · · · · · · · · · · · · · · · ·		
	P. O. Box 2880 Dal	las, Texas 1520/	,			
	Reason(s) for filing (Check proper box)	143, 16,43 /320/	Other (Please explain)			
	New Well		Other (Flease explain)			
		Change in Transporter of:	<b>*</b> Camman - 3 - 4			
	Recompletion	Oil Dry Ga		ith Grayburg Jackson		
	Change in Ownership	Casinghead Gas X Conder	sate from Shelly	•		
	If change of ownership give name s	un Oil Company DY Divis	,	cuoll New Marrian 00001		
	and address of previous owner	an off company by bivis	, O. DOX 1410 RO	swell, New Mexico 88201		
II.	DESCRIPTION OF WELL AND I					
	Lease Namo	Well No. Pool Name, Including F				
	V. L. Foster	4 Fren Seven-Ri	Vers* State, Fede	malorfoo Federal L¢-049998 (		
	Location			·		
	Unit Letter J : 1650 Feet From The South Line and 1650 Feet From The East					
	Line of Section 17 Tow	vnship 17 Range	31 , NMPM,	Eddy County		
II.	DESIGNATION OF TRANSPORT		iS			
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	roved gopy of this form is to be sent) 251a, New Mexico		
	Texas - New Mexico Name of Authorized Transporter of Cas	Pipeline Company	P. O. Box 428 Art	esia, New Mexico		
	Name of Authorized Transporter of Cas	inghead Gas X or Dry Gas	Address (Give address to which app	roved copy of this form is to be sent)		
	Continental Oil Comp	anv	Ponca City, Oklahoma	+2197 Houston Jepan 77001		
	<del></del>	Unit Sec. Twp. Rge.	·   ··· · · · · · · · · · · · · · ·	When		
	if well produces oil or liquids, give location of tanks.	₹G 17 17 31	Yes			
1		<u> </u>	· · · · · · · · · · · · · · · · · · ·	2		
	If this production is commingled with that from any other lease or pool, give commingling order number: $\frac{FC-154}{}$					
IV.	COMPLETION DATA	Oil Well Gas Well				
	Designate Type of Completio	in — (X)	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.		
		ii	1	1		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations	<u> </u>		Depth Casing Shoe		
	•					
	TUBING, CASING, AND CEMENTING RECORD					
				···		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		{				
			·			
v.	TEST DATA AND REQUEST FO	OR ALLOWABLE. (Test must be a	fter recovery of total volume of load o	il and must be equal to or exceed top allow-		
• •	OIL WELL		pth or be for full 24 hours)	er and mass of equal to or exceed top attom-		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)		
			·			
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Drod Duster Tech	OU-Phie	Water-Bbls.	Gas - MCF		
	Actual Prod. During Test	Oil-Bbis.	, inter - Date.	Gue - MOE		
	<u></u>		1			
				•		
	GAS WELL	<del></del>		·		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		

## VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

List Wille	J.B. Hille
(Signature)	
Engineer	
(Tule) April 1, 1970	

(Date)

Tubing Pressure (Shut-in )

## OIL CONSERVATION COMMISSION

Choke Size

Cosing Pressure (Shut-in)

APPROVED_	AFR E A DOU	19	
27	a. Gressett	-	
OIL	OIL AND GAS INSPECTOR		
TITLE			

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

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tosts taken on the well in accordance with RULE 111.

All acctions of this form must be filled out completely for allowable 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.