NO. OF COPIES RECEIVED		15	
DISTRIBUTION			
SANTA FE		/	
FILE		/-	-
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR			
PRORATION OFFICE			
Operator		_	

	NO. OF COPIES RECEIVED	,							
	DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104					
	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-116					
	FILE /-	KEGOEST	AND	Effective 1-1-65					
	u.s.g.s.	4437400174710V TO TO		and the second s					
		AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL GAS						
	LAND OFFICE								
	TRANSPORTER OIL /			4.4.					
	GAS /			e en la companya de					
	OPERATOR								
1	PRORATION OFFICE			The Same					
	Operator								
	Sunray DX 0il C	lomp any							
	Address	on party							
		Dames 17 Vers Monday							
		- Roswell, New Mexico	101 (8)						
	Reason(s) for filing (Check proper box)		Other (Please explain)						
	New Well	Change in Transporter of:		;					
	Recompletion	Oil Dry Go	rs 🔛						
	Change in Ownership	Casinghead Gas Conder	nsate 🔲						
	If change of ownership give name								
	and address of previous owner								
II.	DESCRIPTION OF WELL AND	LEASE							
	Lease Name	Well No. Pool Name, Including F		Lease No.					
	M. Dodd "B"	26 Grayburg Ja	ackson (Metex) State, Federal or	FeeFederal 028731-B					
	Location								
	7 10	90 6	. 660	TP					
	Unit Letter ; 19	80 Feet From The S Lin	ne and 660 Feet From The	E					
	Line of Section 10 Tow	vnship 175 Range	29E , NMPM, E	ldy County					
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS						
	Name of Authorized Transporter of Oil		Address (Give address to which approved	copy of this form is to be sent)					
		•	Des 1510 Md 11 en 1 Manua						
	Texas-New Mexico Pipel	exas-New Mexico Pipeline		Rox 1510 - Midland, Texas Address (Give address to which approved copy of this form is to be sent)					
	Name of Authorized Transporter of Cus								
	Phillips Petroleum Com	pany	Phillips Building - Odess	a, Texas					
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When						
	give location of tanks.	1 A 1 15 1 173 29E	Yes	9-10-67					
			<u> </u>						
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:						
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen P	lug Back Same Res'v. Diff. Res'v.					
	Designate Type of Completion	n (Y)		and Back Same Hes V. Ditt. Hes V.					
	Designate Type of Completion	A	X :	· · · · · · · · · · · · · · · · · · ·					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth P	.B.T.D.					
	8-16-67	8-28-67	2700	2687					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		ubing Depth					
	· ·		2/20	0/70					
	3606 GL	Metex	2429	2470 epth Casing Shoe					
	Perforations			•					
	1 Hole/Ft. 242	9-31-33-37-39-41		2700					
		TUBING, CASING, AN	D CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	12 1/4	8 5/8"	518	200 sox					
				200 81					
	7 7/8	4 1/2"	2700	_					
	Tubing	2"	2470						
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	after recovery of total volume of load oil and	must be equal to or exceed top allow-					
• •	OIL WELL	able for this de	epth or be for full 24 hours)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, e	tc.)					
	9-10-67	9-11-67	Pump						
	Length of Test	Tubing Pressure	Casing Pressure	hoke Size					
	24 Hrs.	Oil-Bbls.	Water - Bbls.	gs - MCF					
	Actual Prod. During Test		Water Bale.	49.6					
		49	0	49.0					
	GAS WELL								
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	ravity of Condensate					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	hoke Size					
	resting Method (phot, ouch pri)	y (BELLE-ZA)							
VI.	CERTIFICATE OF COMPLIAN	CE CE	OIL CONSERVATI	ON COMMISSION					
				4 g					
			APPROVED, 19						
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.		BY W. a. Gressett							
						y		TITLE	
John Hastings John Hastings (Signature)		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							
John Hastings John Hastings									
			tests taken on the well in accordance with RULE 111.						
	(Sign	iture)	tests taken on the well in accordan	ice with RULE 111.					
	Distric	nue)	tests taken on the well in accordan	ice with RULE 111.					
	Distric		tests taken on the well in accordant	nce with RULE 111. oe filled out completely for allow-					
	(Ti	ile)	All sections of this form must able on new and recompleted wells	nce with RULE 111. De filled out completely for allow- . II. and VI for changes of owner,					
	(Ti	ile)	All sections of this form must able on new and recompleted wells	nce with RULE 111. De filled out completely for allow- . II. and VI for changes of owner,					

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.