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LAND OFFICE	
TRANSPORTER	OIL / GAS
OPERATOR	/
PROPERTY NUMBER	

HOWARD OIL, CO. TRANSPORTATION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form OCS-100
Superseded by OCS-101 and
OCS-102 1-1-65

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SEP - 5 1978

O. C. C.
ARTESIA, OFFICE

Sun Oil Company - Oklahoma City District ✓
Address
2525 NW Expressway, Oklahoma City, Ok. 73112
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Condensate ☐
Change in Conductor ☐ Other (Please explain)
Change of address - formerly operated by Sun Oil Company, Box 1861, Midland, TX 79702 - Effective date 6-1-78

If change of ownership give name and address of previous owner: See above

DESCRIPTION OF WELL AND LEASE
Lease Name: Antelope Sink Unit
Well Name: Antelope Sink Upper Penn Gas
Kind of Lease: State
Location: 1890 Feet From The North Line and 2070 Feet From The East Line
Line of Section: 18 Township: 19-S Range: 24-E N.M.P.M. Eddy

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil: Scurlock Oil Company
Name of Authorized Transporter of Condensate or Dry Gas: Natural Gas Pipeline Company of America
Address (Give address to which approved copy of this form is to be sent): 414 Mid-American Bldg., Midland, TX 79702
Box 638, Lovington, New Mexico 88260
If well produces oil or liquid, give location of lands: Unit G Sec. 18 Twp. 19S Rge. 24E
Is gas actually connected? Yes
When: 12-27-68

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA
Designate Type of Completion - (X)
Oil Well ☐ Gas Well ☒ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Other (Specify):
Date Spudded: Date Compl. Ready to Prod.: Total Depth: R.M.T.D.:
Elevations (BS, AAB, RT, GR, etc.): Name of Producing Formation: Top Oil/Gas Pay: Tubing Depth:
Perforations: Depth Casing Shoe:

TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE: CASING & TUBING SIZE: DEPTH SET: SACKS CEMENT:

TEST DATA AND REQUEST FOR ALLOWABLE OIL REPT.
(Test must be after recovery of total volume of lead oil and must be equal to or exceed that able for this depth or be for full 24 hours)
Oil's First New Oil Run To Tanks: Date of Test: Producing Method (Pump, pump, gas lift, etc.):
Length of Test: Tubing Pressure: Casing Pressure: Choke Size:
Actual Prod. During Test: Oil-Prod.: Water-Prod.: GOR-MCF

GAS WHITE
Actual Prod. Test-MCF/D: Length of Test: Data. Condensate/MCF: Gravity of Condensate:
Testing Method (Test, Test 17): Tubing Pressure (lb./sq. in.): Casing Pressure (lb./sq. in.): Choke Size:

CERTIFICATE OF COMPLIANCE
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 Supy/Pror. & Cons. (Date):
2-29-78 (Date)

OIL CONSERVATION COMMISSION
APPROVED: SEP - 6 1978
BY: W. A. Gressett
TITLE: SUPERVISOR, DISTRICT II
This form is to be filed in compliance with RULE 1102.
If this is a request for allowable for a newly drilled or reworked well, this form must be accompanied by a calculation of the oil and gas taken on the well in accordance with RULE 111.
All entries on this form must be filled out completely for a file on new and reworked wells.
Fill out only sections I, II, III, and IV for change of well name or number, or transporter, or other such change of well.