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Appropriate District Office
DISTRICT |
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

<u> </u>	T	O TRANS	SPORT OIL	AND NA	IUHAL GA					
							API No.			
Oryx Energy Company						30-039-24057				
P. O. Box 1861, Mid	land. Te	xas 797	702							
Reason(s) for Filing (Check proper box)				Othe	x (Please explo	nin)				
New Well		Change in Tra								
Recompletion Change in Operator X	Oil Cosinghand	X Dr.	_	To A	mend C-1	04 Date	d 4-25-8	39		
						1061			70702	
and address or previous operator Su	n Explor	ation &	Production	on Co.,	P. O. Bo	x 1861,	Midland	, lexas	79702	
L DESCRIPTION OF WELL	AND LEA				<u> </u>			Federal	· .	
Lease Name	1	. i	ol Name, Includi	ng Formation	666 D	1 1	of Lease Federal or Fe	_	:ase No. :039	
Full Sail "C" (BPO)		4			1000 V	77/\\		1		
Unit LetterI	. 1420	0 Fe	et From The	South Line	and 660	Fe	et From The	East	Line	
,					D.				_	
Section 3 () Townst	ip 25-N	Ra	nge 2-W	, NI	ирм, К10	Arriba	<u> </u>		County	
III. DESIGNATION OF TRA	VSPARTER	OF OIL	AND NATII	RAL GAS						
2. 22.0	.01 011121	. 01 01-								
V. CUITE LEAD.		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		<u>i</u>	<u>i</u>			<u> </u>	J	<u> </u>	1	
Date Spudded	Date Compi	. Ready to Pro	od.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Perforations	<u> </u>						Depth Casi	ng Shoe		
		UDDIC C	A CINIC A NID	CEMENTI	NG PECOP	D	1			
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
HOLL OILL										
							ļ	· · · · · · · · · · · · · · · · · · ·		
V. TEST DATA AND REQUE	ST FOR A	LLOWAB	LE	J						
OIL WELL (Test must be after	recovery of tol	al volume of l	oad oil and must	be equal to or	exceed sop all	owable for the	is depth or be	for full 24 hos	ers.)	
Date First New Oil Run To Tank	Date of Test	t		Producing M	ethod (Fiow, pr	ump, gas lift,	etc.)			
Length of Test	Tubing Pres	Tubing Pressure			Casing Pressure			66	VE IN	
renkn or tex	I doing ries	Tuoing Flessure							- IU	
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas-MCFJUL1 3 1989			
				<u> </u>				COL	DIV.	
GAS WELL				16.: a	ORIGE		Gravity of		DIV	
Actual Prod. Test - MCF/D	Length of T	Length of Test			Bbis. Condensate/MMCF			weigh:		
Testing Method (puot, back pr.)	Tubing Pres	ssure (Shut-in))	Casing Press	ure (Shut-in)		Choke Size	***************************************		
seeme seemen thank some by A		, ,						<u> </u>		
VI. OPERATOR CERTIFI	CATE OF	COMPL	IANCE		OII	1055	ATION	חווייייייייייייייייייייייייייייייייייי		
l hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				_	Date Approved JUL 1 3 1989					
is the site confidence to the ora of the sitewardige and belief.				Date	Date ripproved					
Marin I - Hers					But) Chang					
Signature Association of the Signature				By_			•	DISTRIC	r # 3	
Maria L. Perez Printed Name	<u> </u>	Accounta Ti	int	Tilla		ggr tit			••	
7/6/89		915-688-	-0375	Title						
Date		Teleph	one No.	ll .						

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.