

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
JAN 3 8 00 AM '67

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. Operator
Sunset International Petroleum Corporation
Address
201 Wall Building, Suite 308, Midland, Texas
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name **T. P. State** Well No. **1** Pool Name, including Formation **North Bagley, Wolf Camp** Kind of Lease **Wolf Camp** State **Lea** Lease No. **00-201**
Location
Unit Letter **L** ; **2050** Feet From The **south** Line and **550** Feet From The **West**
Line of Section **11** Township **11S** Range **33E** , NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Pan American Address (Give address to which approved copy of this form is to be sent)
201 Wall Bldg, Suite 308, Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Warren Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit **L** Sec. **11** Twp. **11S** Rge. **33E** Is gas actually connected? **no** When **available**

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☒ Same Res'v. ☐ Diff. Res'v. ☒
Date Spudded **9-16-66** Date Compl. Ready to Prod. **12-22-66** Total Depth **10325** P.B.T.D. **8863**
Elevations (DF, RKB, RT, GR, etc.) **4242.7 Gr** Name of Producing Formation **Wolf Camp** Top Oil/Gas Pay **8805** Tubing Depth **8826 Packer**
Perforations **8805' to 8818' # 13' 2 holes per ft.** Depth Casing Shoe **10325**
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17 1/2" **13 3/8" 48'** **363'** **375 Sacks-circulated**
11" **8 5/8" 24' & 32'** **3770'** **300 sacks-top 2500**
7 7/8" **5 1/2" 17'** **10325** **1060 sacks-top 7800**
D.V. Tool 4712 **300 sacks Top 3800**

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)
Date First New Oil Run To Tanks **12-22-66** Date of Test **12-29-66** Producing Method (Flow, pump, gas lift, etc.) **Flow**
Length of Test **24 hr.** Tubing Pressure **225 PSI** Casing Pressure **Packer** Choke Size **16/64**
Actual Prod. During Test **184** Oil-Bbls. **176** Water-Bbls. **8** Gas-MCF **211**

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

VI. 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.
Donny Heath
Dist. Supt.
12-29-66
(Signature) (Title) (Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY _____
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 tests taken on the well in accordance with RULE 111.
All sections 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.