NO. OF COPIES RECEIVED			
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SANTA FE			
FILE	AND Supersedes Old C-104 and C-1 Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE		I I I I I I I I I I I I I I I I I I I	UND GAS
TRANSPORTER OIL			
GAS	1		
OPERATOR			
PRORATION OFFICE			
Operator			
Sunset Inter	national Petroleum Corpora	tion	
Address			· · · · · · · · · · · · · · · · · · ·
201 Wall Bldg. Su	bte 308, Midland, Texas		
Reason(s) for filing (Check proper		Other (Please expl	
New Well	Change in Transporter of:	Oner (Trease expl	
Recompletion	Oil Dry C		
Change in Ownership			
		ensate	
If change of ownership give nam	ne		
and address of previous owner _			
			Ch An.
DESCRIPTION OF WELL A		horth Barlow	Haver Brand I Al
Lease Name	Well No. Fool N	ame, Including Formation J	Kind of Ledge 0 G N/ G /
· · · · · · · · · · · · · · · · · · ·	1 7.1+1	Begley Strawn-	State, Federal or Fee State
Location			2.11 2)
Unit Letter 📕 ;	2050 Feet From The South	ne and 550 Fe	et From The West
· · · · · · · · · · · · · · · · · · ·		1 C	
Line of Section 11	Township <b>11 S</b> Range	33 S , NMPM,	Les. County
		. <u> </u>	county :
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of	Oil Cor Condensate		ch approved copy of this form is to be sent)
Permian 0il	Prenanast		
Name of Authorized Transporter of	Casinghead Gas or Dry Gas	Address (Give address to whi	<b>308.</b> Midlandy Terms ich approved copy of this form is to be sent)
Warren Petroleum			
	Unit Sec. Twp. Rge.	Is gas actually connected?	te 308, Midland, Teres
If well produces oil or liquids, give location of tanks.			When
giro recation or tanks.	L 11 118 33%	No	Approval received
f this production is commingled	with that from any other lease or pool,	give commingling order num	be <del>r</del> :
COMPLETION DATA			······
Designate Type of Compl	etion - (X)	New Well Workover De	eepen Plug Back Same Res'v. Diff. Res'v.
	UIL	New	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-16-66	11-9-66	10325	10175
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Bagley	Penn	10085	10058
Perforations			Depth Casina Shoe
10085-95, 10114-1	6, 10120-30, 10137-43, 101	56-58, 2 Holes Per	Ft. 10325
	TUBING, CASING, AN	D CEMENTING RECORD	10)2)
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS OFNENT
17=	13 3/8 48#	363	SACKS CEMENT
11			375 Sacks Ciculated
7 7/8	8 5/8 24 & 32	3770	300 Sacks- Top 2500
(1/0	5 17#	10325	1060 Sacks Top 7800
		DV Tool 4712	300 Sacks Tep 3800
EST DATA AND REQUEST		after recovery of total volume of	load oil and must be equal to or exceed top allow-
DIL 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, pum)	p, gas lift, etc.)
11-10-66	11-13-66	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hrs.	450 PSI	Packer	20/64
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas - MCF
432	216	216	413
AS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
			-,
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
		,	CHORE DIZE
EDTIFICATE OF COURTE		<u> </u>	
ERTIFICATE OF COMPLIA	INCE	OIL CONS	ERVATION COMMISSION
		$\cap$	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED	, 19
ommission have been complied bove is true and complete to	d with and that the information given the best of my knowledge and belief.	In Short	Rangen
	seet of my knowledge and bellef.	BY ANILL	y amp
	<b>^</b>	TITLE	
	()   -1		
longi	VAI - TXI	This form is to be fil	led in compliance with RULE 1104.
Lima	Tiarrel	If this is a request fo	or allowable for a newly drilled or deepened
	L'S. AL	well, this form must be ac tests taken on the well in	companied by a tabulation of the deviation accordance with RULE 111.
L'ASTRIA	nipi		
	Title)	able on new and recomple	orm must be filled out completely for allow-
11. 1	4-66	1	II, III, and VI only for changes of owner.
<u> </u>	(Date)	FILL OUL SECTIONS L	II, III, and VI ONLY for Champes of owner

Fill out Sections I, II, III, and VI only 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

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ంచింది. కాండి ఉంది. కాండి క వింది కాండి కాండ వింది కాండి కాండ