

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

**I. Operator**  
Operator: **Sun Oil Company**  
Address: **Box 2792, Odessa, Texas 79760**

Reason(s) for filing (Check proper box):  
 New Well  Change in Transporter of:  
 Recompletion  Oil  Dry Gas   
 Change in Ownership  Casinghead Gas  Condensate

If change of ownership give name and address of previous owner: -

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name: **New Mexico "H" State** Pool Name: **8 ~~Und.~~ - Cato, S.A.** Kind of Lease: **State** Lease No.: **K-3259**

Location:  
 Unit Letter: **F** 1980 Feet From The **North** Line and 1980 Feet From The **West**  
 Line of Section: **16** Township: **8S** Range: **30E** NMPM, **Chaves** County

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil  or Condensate   
**Scurlock Oil Company** Address: **414 Mid American Bldg., Midland, Texas**

Name of Authorized Transporter of Casinghead Gas  or Dry Gas   
 - Address: -

If well produces oil or liquids, give location of tanks:  
 Unit: **7** Sec.: **16** Twp.: **8S** Rge.: **30E** Is gas actually connected? **No** When: -

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

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Well <input type="checkbox"/>	Well Rehab. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
4-13-67	5-4-67	3506		3463				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil <del>3278</del>		Tubing Depth				
DF 4130, GR 4121, RKB 4131	Und. - Cato, S.A.	3278		3400				
Perforations						Depth Casing Shoe		
3299, 3301, 11, 15, 16½, 21, 23, 27, 35, 71, 79, 81, 90, 92, 97 (15 Holes)						3505		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12½	8-5/8		455		300 Sks			
7-7/8	4-1/2		3506		300 Sks			
	2-3/8		3400					

**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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
4-21-67	5-4-67	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	18 x 54 SPM	20#	2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
116 Bbls.	74.00	42.00 Load & acid	TSTM

**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.

  
 (Signature) **J. E. Edison**  
**Area Supt.**  
 (Title)  
**5-5-67**  
 (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.