NO. OF COPIES RECEIVED	1		Orig & 2c0: OCC-Hobbs cc: Regional, File	
DISTRIBUTION		L CONSERVATION COMMISS	and the second	
SANTA FE	REQUE	ST FOR ALLOWABLE	Effective 1-1-65	
FILE		AND		
U.S.G.S.	_ AUTHORIZATION TO 1	FRANSPORT OIL AND NA	IURAL GAS	
AND OFFICE	-			
RANSPORTER GAS				
OPERATOR	-			
		Sinclair Oil Corporation Merged	· · · · · · · · · · · · · · · · · · ·	
perator SINCLAI	2 OIL CORPORATION	ato Atlantic Richfield Company		
Sinclair Oil & Uns	COLL CORPORATION	flective March 4, 1969	· · · · · · · · · · · · · · · · · · ·	
Box 1920, Hobbs, No	w Marico 882k0			
Reason(s) for filing (Check proper bo	x)	Other (Please ex		
Iew Well	Change in Transporter of:	Initial	Transporter for Casinghead Ge	
Recompletion	Oil 🚺 Dr	y Gas		
Change in Ownership	Casinghead Gas Ca	ondensate		
change of ownership give name nd address of previous owner				
·				
ESCRIPTION OF WELL AND	Well No. Poo	ol Name, Including Formation	Kind of Lease	
State 367	2	Blinebry	State, Federal or Fee State	
Location				
Unit Letter 1 ;6	60 Feet From The	_Line and	Feet From The	
		37 B . NMPM.	Tes. Count	
Line of Section 36 , T	ownship 238 Range	, NMPM,	Count Count	
		CAR		
DESIGNATION OF TRANSPOL Name of Authorized Transporter of C	RTER OF OIL AND NATURAL	Address (Give address to	which approved copy of this form is to be sent)	
		Box 1510, Midlu	und, Texas	
Texas New Mexico Pip	Casinghead Gas 🚺 or Dry Gas 🗌	Address (Give address to	which approved copy of this form is to be sent)	
Warren Petroleum Cor		Box 1589, Tulm	, Oklahoma	
	Unit Sec. Twp. Hge			
If well produces oil or liquids, give location of tanks.	L 36 218 3	7E Ies	5-28-65	
this production is commingled y	with that from any other lease or p	pool, give commingling order r	number: PC 261	
COMPLETION DATA			Deepen Plug Back Same Res'v. Diff. Re	
Designate Type of Comple	Oil Well Gas W	ell 'New Well 'Workover		
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Late Spudded	Date Compl. Reday to Prod.	Total Depti		
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Pool				
Perforations			Depth Casing Shoe	
	TUBING, CASING	, AND CEMENTING RECORD)	
HOLE SIZE	CASING & TUBING SIZE	E DEPTH SE	TSACKS CEMENT	
			ci i i - i - i - i - i - i - i - i - i -	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test mus able for a		e of load oil and must be equal to or exceed top a	
OIL WELL Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow,	pump, gas lift, etc.)	
The Public of the Period				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
			Gas-MCF	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Guo - MOI	
GAS WELL	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Prod. Test-MCF/D	Longin ox 1000			
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
. sound domes (build ago, buy				
CERTIFICATE OF COMPLI	ANCE	OILC	CONSERVATION COMMISSION	
UERITIUALE OF COMPLE		k.		
I hereby certify that the rules a	nd regulations of the Oil Conserv	APPROVED	, 19	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				
above is true and complete to	the near of my knowledge and p			
1/1		TITLE		
In P		This form is to	be filed in compliance with RULE 1104.	
Linkh	\sim		next for allowable for a newly drilled or deep	
(Signature)	mall this form must	t be accompanied by a tabulation of the devi well in accordance with RULE 111.	
Superinte		All sections of	this form must be filled out completely for a	
	(Title)	able on new and re	able on new and recompleted wells. Fill out Sections I, II, III, and VI only for changes of our	
June 1, 1	<u>765</u>	Fill out Section	ons I, II, III, and VI only for changes of o r, or transporter, or other such change of cond	
	(Date)	Separate Form	s C-104 must be filed for each pool in mu	
		Separate Form		