DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

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

Note: Application to commingle w/Drinkard has been submitted. We hereby request temporary permission to commingle pending approval of application.

I. Operator

Sun Oil Company

Address

P. O. Box 2792 Odessa, Texas 79760

Reason(s) for filing (Check proper box)

New Well		Change in Transporter of:			
Recompletion	X	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

UNDESIGNATED Blinebry R-3530

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
A. W. Weatherly	4	Blinebry Oil	State, Federal or Fee Fee	

Location

Unit Letter K : 2052.6 Feet From The West Line and 2057.6 Feet From The South

Line of Section 17 Township 21S Range 37E NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil X or Condensate	Address (Give address to which approved copy of this form is to be sent)
Shell Pipe Line Company	Box 2648 Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas X or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Skelly Oil Company	Box 1650 Tulsa, Okla. 74102

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	17	21S	37E	Yes	12-8-54

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
	X					X		X

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-5-48	10-24-48	6646	6645
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
DF 3484, GR 3475	Blinebry Oil	5825	6013
Perforations One 3/8" hole @ 5825-27-29-31-33-35-37-39-41-43-45-47-49-51-53-55-5922-24-26-28-30-32-34-36-38-40-42-44-46-48 (30 holes)			Depth Casing Shoe 6610

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
16	13-3/8	348	300
12¼	9-5/8	2841	1600
8-3/4	5-1/2	6646	600

V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)
7-11-68	7-27-68	Pump

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	-	-	-

Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	13.80	11	11.4

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)

Proration Clerk

(Title)

7-29-68

(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