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DISTRIBUTION SANTA FE	NEW MEXICO OIL CONSERVATION COMMJION REQUEST FOR ALLOWABLE AND		Form C-104 Supersedes Old C-104 and C-110
FILE			
J. 1.G 5	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL GA	SECEIVE 1-1-65 SECEIVED
NO OFFICE			CEI
LANTOR R GAS			1968
SEC OR	SUNRAY DX OIL	CO.	101 8 13°
TOP IN ION OFFICE	NAME CHANGED Q	101 EFF	ECTIVE 4-6-7910
Sunray DX Oil Con	SUN OIL CO 1		MPAN PAN BIVISION
Address	•	P 0 B0X 2880	E CHANGED TO
P. O. Box 1416 Reason(s) for filing (Check proper box	Roswell, New Mexico	LLAS, TEXAS 75201 SUN	OIL COMPANY
New Well	Change in Transporter of:		
Recompletion	Oll Dry Gas		+ 000
Change in Ownership X	Casinghead Gas Conden	sate hange Trans	sortere address
If change of ownership give name and address of previous owner	General Western Petrolew	m Corp. 40 Bacon Bldg.,	Abilene, Texas
. DESCRIPTION OF WELL AND	LEASE		
Lesse Name	Well No. Pool Name, Including Fo	<u> </u>	Legse No.
Ties Federal	6 High Lonesome	State, rederal	Prese Federal 046119A
Le ation	SO Feet From The S Line	e and 660 Feet From Th	E E
Init Letter 1 : 190	Feet From The		
_ine of Section 17 To	wnship 16 Range	29 , ммрм,	Eddy County
. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S Address (Give address to which approve	d copy of this form is to be sent)
Tel Tonesche Pipe	line Company	P. O. Box 1416 Roswe Address (Give address to which approve	ell, New Mexico
The second the rized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which approve	a copy of this form is to be sent,
Ic Market - Flared	Unit Sec. Twp. Rge.	Is gas actually connected? When	
If well produces oil or liquids, give location of tanks.	N 17 16 29	l l	<u></u>
	th that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completi	iii		P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B, 1.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Destantion			Depth Casing Shoe
Perforations			
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			t and a second to all and
V. TEST DATA AND REQUEST F OR, WELL	OR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil a pth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	, etc.)
	Tubba Paranta	Casing Pressure	Choke Size
Length of Test	Tubing Pressure		
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF
GAS WELL		Table 6. 1	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Grdvity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
I. CERTIFICATE OF COMPLIANCE		OIL CONSERV/TION COMMISSION	
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.		APPROVED, 19	
		1 1 A homest	
		OIL AND GAS INSPECTOR	
		TITLE	
		This form is to be filed in compliance with RULE 1104.	

(Signature)

Acting District Engineer (Title)

7-5-68 (Date) 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.