	DISTRIBUTION SANTA FE / FILE / /		DNSERVATION COMMISSION FOR ALLOWABLE AND	Porm C-104 Supersedes Old C-104 and C-11 Effective 1-1-65
	J.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		s RECEIVED
	LAND OFFICE IRANSPORTER OIL V GAS V			FEB 8 19 <b>82</b>
	OPERATOR V PROBATION OFFICE			O. C. D.
1.	Operator	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	ARTESIA, OFFICE
	Sun Exploration & Production Co. /			
	P. O. Box 1861, Midland, Texas 79702 Reason(s) for filing (Check proper box)			
	New Well Change in Transporter of:			
	Recompletion Oil Cry Gis From: Sun Oil Company			
	Change In Ownership			
	change of ownership give name nd address of previous owner			
п.	DESCRIPTION OF WELL AND LEASE			
	Lease Name M. Dodd "A" Location	Weil No.         Pool Name, Including For           7         Grayburg Jacks		Fee Federal LC028731
	Unit Letter P : 330 Feet From The South Line and 330 Feet From The East			
	Line of Section 22 Tow	nshio 17-5 Range	29-E , NMPM. Eddy	County
	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil 🕝 or Condensate 🗌 Address (Give address to which approved copy of this form is to be sent)			
	Texas-New Mexico Pipe L		P. O. Box 1510, Midland Address (Give address to which approved	Texas 79702
	Phillips Pipe Line Comp		lst Floor Phillips Bldg	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Age. J 22 17 29	Is gas actually connected? When	0k. 74004
	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA			
	Designate Type of Completio	n = (X) Gas Well ,	New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.
	Date Spudded	Date Compi. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
	Pertorations Depth Casing Shoe			
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
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 allow- able for this depth or be for full 24 hours)			
	OIL WELL Date First New Oil Bun To Tanks	Date of Test	Froaucing Method (Flow, pump, zas lift,	esc., fosted IP-3
	Longin of Tool	Tubing Pressure	Cosing Pressure	Cheke Size
	Actual Prod, During Test	Cil-Bbls.	Water-Bbls.	Gas - MCF
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbla. Condensate/MMCF	Gravity of Condensate
	Testing Mothod (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	I hereby certify that the rules and regulations of the Oil Conpervation 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	
			BY_ C.C. Gresset	
			TITLESUPERVISOR, DISTRICT II	
	Mann & Pire		This form is to be filed in compliance with RULE 1104.	
	(Signatule)		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 allow- able on naw and recompleted wells. Fill out only Sections I. II. III, and VI for changes of owner,	
	Senior Accounting Assistance			
	(Title) January 25, 1982			
	(Date)		well name or number, or transporte	r, or other such change of condition.