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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
EFFECTIVE 4-1-70
SUN OIL COMPANY-DX DIVISION
NAME CHANGED TO
SUN OIL COMPANY

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65
RECEIVED
JAN 2 1969
O. C. C.
ARTESIA, OFFICE

Operator	Sun Oil Company - DX Division	P. O. BOX 2880	O. C. C.
Address	DALLAS, TEXAS 75201		

Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No.	Pool Name, including Formation	Lease No.
Hope Unit	1	Undesignated	E-7868
Location			
Unit Letter J	1980	Feet From The South	Line and 1980 Feet From The East
Line of Section 19	Township 18-S	Range 23-E	, NMPM, Eddy County

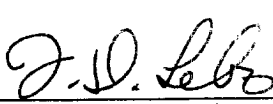
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
None	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Natural Gas Pipeline Company of America	P. O. Box 638 - Lovington, New Mexico 88260
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	Yes December 27, 1968

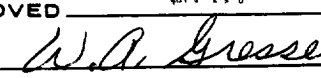
If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>
Date Spudded 1-14-64	Date Compl. Ready to Prod. 4-1-68
Elevations (DF, RKB, RT, GR, etc.) 4082 D.F.	Name of Producing Formation Pennsylvanian
Perforations (All 2 Holes/ft.) 5870-86, 5930-50, 6028-40	Top Oil/Gas Pay 5870
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
17-1/2	13-3/8", 48#, H-40
11	8-5/8", 24#, J-55
7-7/8	5-1/2", 14#, 15.5#, 17#, J-55
-	2-3/8", 4.7#, J-55
Total Depth 7475	P.B.T.D. 7440
Top Oil/Gas Pay 5870	Tubing Depth 7112
Depth Casing Shoe 7476	

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.)
Length of Test	Tubing Pressure
	Casing Pressure
Actual Prod. During Test	Oil-Bbls.
	Water-Bbls.
	Gas-MCF

GAS WELL	
Actual Prod. Test-MCF/D	Length of Test
535	24 Hrs.
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)
Back Pressure	1700
Bbls. Condensate/MMCF	Gravity of Condensate
Trace	48.5
Casing Pressure (shut-in)	Choke Size
1400	13/64

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.	
	F. D. Lebo
(Signature)	
District Engineer	
(Title)	
December 31, 1968	
(Date)	

OIL CONSERVATION COMMISSION	
JAN 24 1969	
APPROVED	19
BY 	
TITLE OIL AND GAS INSPECTOR	
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.	