1	DISTRIBUTION	1		
	JANTA FE		ONSERVATION COMMISSION	Form C-104
	TILE	REQUEST FOR ALLOWABLE		RECEIVEDUID C-104 and C-11
	J.S.G.S.		AND	
	LAND OFFICE	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	
	01			FEB 8 198 2
	TRANSPORTER GAS			
	OPERATOR			O. C. D.
1	PRORATION OFFICE	1 1		ARTESIA, OFFICE
••	Cperator	· · · · · · · · · · · · · · · · · · ·		
	Sun Exploration & Production Co.			
	Address			
	P. O. Box 1861, Midland, Texas 79702			
	Reason(s) for filing (Check proper box) Other (Please explain)			
	New Well	Change in Transporter of:	Namo Chango Only	.,
	Recompletion	Cil Dry Gat	Name Change Only	
	Change in Ownership	Casinghead Gas Conden	sate From: Sun Oil (Jompany
	f change of ownership give name			
	and address of previous owner			
11.	ESCRIPTION OF WELL AND LEASE			
		Well No. Popi Name, including Fo		28430 110.
	East Millman Pool Ut. Tr	4 3 Millman Queen	Grayburg, East State, Federal	cr Fee State 0G-784
	Location			
	Unit Letter 0 ; 330	Feet From The South Line	e and <u>2278</u> Feet From T	The East
	Line of Section 12 Tow	vinship 19-S Range	20 E 511	
	runge 20 L y Kan by LUUV County			
111	ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
	Neme of Authorized Transporter of Oil		Adress (Give address to which approv	red copy of this form is to be sent
	avajo Refining Company			
•	Name of Authorized Transporter of Cas		Address (Give address to which approv	Les in New Move 00210
I	hillips Pipe Line Compa		1st Floor Phillips Bld	
		Unit Sec. Twp. Age.	Is gas actually connected? , Whe	
	If well produces oil or liquids, give location of tanks.			UK. 74004
	t shi			······································
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA			
		Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
	Designate Type of Completio	n = (X)		
	Date Spudded	Date Compl. Ready to Pred.	Total Deptn	P.B.T.D.
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oli/Gas Pay	Tubing Depth
		· · · · · · · · · · · · · · · · · · ·		1
	Perforations			Depth Casing Shoe
		TUBING, CASING, AND	CEMENTING RECORD	
	HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			ļ	
		ļ		
		1	}	
v.	EST 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 Run To Tanks	Date of Teat	Producing Method (Flow, pump, zas lij	
	Date First New OIL Ath 10 Tanks		Producting Method (Prow, pump, 2d3 ti)	$\varphi(s) = \varphi(s)$
	Length of Teat	Tubing Pressure	Casing Pressure	Cheke Size
	Actual Prod. During Test	Cil-Bbla.	Water-Bbis.	
	GAS WELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbla. Condenagte/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		(,		
VI	CERTIFICATE OF COMPLIAN	L		TION COMMISSION
v 1.	CENTIFICATE OF COMPLIMACE		11	
	There is a star of a star of the star		APPROVED MAR 1.0 1982	
	I hereby certify that the rules and r Commission have been complied w	with and that the information given		
	above is true and complete to the			
			ill b	
	Marin I Pere			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.	
	Senior Accounting Assistance			
			All sections of this form must be filled out completely for allow- able 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.	
	(Tu			
	January 25, 1982			
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