NO. OF COPIES RECEIVED	-	,=-e***	
DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	Form C-104
SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
FILE		AND REGS	IVED
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL G	AS
LAND OFFICE	AUTHORIZATION TO TH		
TRANSPORTER OIL GAS		MAY S	2 1972
OPERATOR		frig	rangang Sundagan
PRORATION OFFICE			20 List.
Operator Harlan 011 Co	mpany		
P. 0. Box 668	, Artesia, New Mexico 832	?1 0	
Reason(s) for filing (Check prope		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion	Oil Dry C	Gas	
Change in Ownership X	Casinghead Gas Cond	lensate	
If change of ownership give na and address of previous owner		. Box 1515, Roswell, New	
DESCRIPTION OF WELL A	Well No. Pool Name, Including	Formation Kind of Lease	<i>MM</i>
Sun Federal	1 V Vackharry Ma	tes. State, Federa	of Fee Foders 7 0557729
	1 R Muchberry 40	ces, pre- H Rivers,	7000701
Location Unit Letter F	1980 Feet From The N L	ine and 1980 Feet From	The <u>W</u>
Line of Section 20	Township 19S Range		Eddy County
DECICNATION OF TRANS	PORTER OF OIL AND NATURAL G	GAS	
DESIGNATION OF TRANS	PORTER OF OIL AND NATURAL O	GAS Address (Give address to which appro	wed copy of this form is to be sent)
Name of Authorized Transporter	of Oil or Condensate	Address (Give tauress to which appro	
Name of Authorized Transporter	of Oil or Condensate	Address (Give address to which appro P. O. Box 1510. Midlan Address (Give address to which appro	d. Teras 79701
Name of Authorized Transporter	of Cil or Condensate	P. O. Box 1510. Midlan Address (Give address to which appro	d. Teras 79701
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingly	of Condensate or	P. O. Box 1510. Midlan Address (Give address to which appro	d. Texas 79701 wed copy of this form is to be sent)
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA	of Condensate or	P. O. Box 1510. Midlan Address (Give address to which appro	d. Texas 79701 wed copy of this form is to be sent)
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter if well produces oil or liquids, give location of tanks. If this production is commingly	of Condensate or	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? When the pro- pl, give commingling order number: New Well Workover Deepen	d. Texas 79701 wed copy of this form is to be sent) men Plug Back Same Res'v. Diff. Res
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA	of Condensate or	P. O. Box 1510. Midlan Address (Give address to which appro	d. Texas 79701 wed copy of this form is to be sent)
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded	of Condensate or	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? Wr. F.	d. Texas 79701 wed copy of this form is to be sent) nen Plug Back Same Res'v. Diff. Res
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com	of Condensate or	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? When the pro- pl, give commingling order number: New Well Workover Deepen	d. Texas 79701 nved copy of this form is to be sent) nen Plug Back Same Res'v. Diff. Res P.B.T.D.
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR,	of Condensate or	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? Wr. F.	d. Texas 79701 nved copy of this form is to be sent) nen Plug Back Same Res'v. Diff. Res P.B.T.D.
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded	of Coll Port or Condensate or	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? White the property of	Plug Back Same Restv. Diff. Res
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR,	of Coll R or Condensate or Con	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? When the pro- Is give commingling order number: New Well Workover Deepen	Plug Back Same Restv. Diff. Res
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR,	of Coll Port or Condensate or	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? White the property of	d. Texas 79701 ned copy of this form is to be sent) nen Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR,	of Coll R or Condensate or Con	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? When the pro- Is give commingling order number: New Well Workover Deepen	d. Texas 79701 ned copy of this form is to be sent) nen Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR,	of Coll R or Condensate or Con	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? When the pro- Is give commingling order number: New Well Workover Deepen	d. Texas 79701 ned copy of this form is to be sent) nen Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR,	of Coll R or Condensate or Con	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? When the pro- Is give commingling order number: New Well Workover Deepen	d. Texas 79701 ned copy of this form is to be sent) nen Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE	of Coll R or Condensate or Condensate or Coll R or Condensate or Coll R or Condensate or Coll R	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? Wh. P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? Wh. P. O. Box 1510. Midlan Address (Give address to which appro- Which approved to the pro- New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET	d. Texas 79701 need copy of this form is to be sent) Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE	or Condensate poe Line Co. of Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. 20 198 31. ed with that from any other lease or poor pletion — (X) Date Compi. Ready to Prod. etc., Name of Producing Formation TUBING, CASING, A CASING & TUBING SIZE	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? Vit. Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET	Depth Casing Shoe
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE TEST DATA AND REQUEOUS OIL WELL	of Coll R or Condensate or Condensate or Coll R or Condensate or Coll R or C	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET De after recovery of total volume of load oils depth or be for full 24 hours)	d. Texas 79701 oved copy of this form is to be sent) ien Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE	of Coll R or Condensate or Condensate or Coll R or Condensate or Coll R or C	P. Q. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? Vit. Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET	d. Texas 79701 oved copy of this form is to be sent) ien Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE TEST DATA AND REQUE OIL WELL Date First New Oil Run To Tar	of Coll Recompleted Gas or Dry Gas of Casinghead Gas or Dry Gas or	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay AND CEMENTING RECORD DEPTH SET De after recovery of total volume of load oils depth or be for full 24 hours) Producing Method (Flow, pump, gas	Depth Casing Shoe SACKS CEMENT It and must be equal to or exceed top all
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE TEST DATA AND REQUEOUS OIL WELL	of Coll R or Condensate or Condensate or Coll R or Condensate or Coll R or C	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET De after recovery of total volume of load oils depth or be for full 24 hours)	Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top all lift, etc.)
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE TEST DATA AND REQUE OIL WELL Date First New Oil Run To Tar	of Coll Recompleted Gas or Dry Gas of Casinghead Gas or Dry Gas or	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET De after recovery of total volume of load oils depth or be for full 24 hours) Producing Method (Flow, pump, gas Casing Pressure	Depth Casing Shoe SACKS CEMENT It and must be equal to or exceed top all lift, etc.) Choke Size
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingle COMPLETION DATA Designate Type of Compate Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE TEST DATA AND REQUEOUS VIEW Date First New Oil Run To Tar	of Coll Recompleted Gas or Dry Gas of Casinghead Gas or Dry Gas or	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay AND CEMENTING RECORD DEPTH SET De after recovery of total volume of load oils depth or be for full 24 hours) Producing Method (Flow, pump, gas	d. Texas 79701 need copy of this form is to be sent) Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter if well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE TEST DATA AND REQUE OIL WELL Date First New Oil Run To Tar Length of Test	of Coll or Condensate or Director of Casinghead Gas or Dry Gas or Dry Gas	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET De after recovery of total volume of load oils depth or be for full 24 hours) Producing Method (Flow, pump, gas Casing Pressure	d. Texas 79701 need copy of this form is to be sent) Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT Il and must be equal to or exceed top all lift, etc.) Choke Size
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter If well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE TEST DATA AND REQUE OIL WELL Date First New Oil Run To Tar Length of Test	of Coll or Condensate or Director of Casinghead Gas or Dry Gas or Dry Gas	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET De after recovery of total volume of load oils depth or be for full 24 hours) Producing Method (Flow, pump, gas Casing Pressure	d. Texas 79701 need copy of this form is to be sent) Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT If and must be equal to or exceed top al lift, etc.) Choke Size
Name of Authorized Transporter Texas New Mexico Pi Name of Authorized Transporter if well produces oil or liquids, give location of tanks. If this production is commingl COMPLETION DATA Designate Type of Com Date Spudded Elevations (DF, RKB, RT, GR, Perforations HOLE SIZE TEST DATA AND REQUE OIL WELL Date First New Oil Run To Tar Length of Test	of Coll or Condensate or Director of Casinghead Gas or Dry Gas or Dry Gas	P. O. Box 1510. Midlan Address (Give address to which appro- Is gas actually connected? New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET De after recovery of total volume of load oils depth or be for full 24 hours) Producing Method (Flow, pump, gas Casing Pressure	d. Texas 79701 med copy of this form is to be sent) Plug Back Same Res'v. Diff. Res P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT Il and must be equal to or exceed top al lift, etc.) Choke Size

Length of Test Actual Prod. Test-MCF/D Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION

TITLE

VI. CERTIFICATE OF COMPLIANCE

May 22, 1972

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given those is true and complete to the best of my knowledge and belief.

bove is true and c	omplete to the best of my kno	wiede en e essessi
10 h.	0.0.	
CC Ba	adsan	
	(Signature)	
Agent	(Title)	

(Date)

This form is to be filed in compliance with RULE 1104.

4.2 WSPECTOR

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.