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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS **RECEIVED**

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

NOV 25 1968

O. C. E.
ARTESIA, OFFICE

I. Operator **Sun Oil Company - DX Division**

Address: **P. O. Box 1416 - Roswell, New Mexico 88201**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of:

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Antelope Sink Unit	Well No. 1	Pool Name, including Formation Antelope Sink Upper Penn Gas	Kind of Lease State, Federal or Fee State	Lease No. E-7901
Location				
Unit Letter G ; 1890 Feet From The North Line and 2070 Feet From The East				
Line of Section 18 Township 19-S Range 24-E , NMPM, Eddy County				

III. 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.	Unit	Sec. Twp. Rge.
		Is gas actually connected? No When 12-27-68

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 7-7-63	Date Compl. Ready to Prod. 9-20-63		Total Depth 8695		P.B.T.D. 8000 8484			
Elevations (DF, RKB, RT, GR, etc.) 3813 GR	Name of Producing Formation Penn - Cisco		Top Oil/Gas Pay 6148		Tubing Depth 6053 (Packer not set)			
Perforations 6148 - 6366 (53 holes)		Bridge plug set @ 8000' over perfs 8410' to 8418'		Depth Casing Shoe 8690'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8, 48#, H-40		171'		175 sxs (Circulated)			
12-1/4"	9-5/8, 32# & 36#, J-55		2088'		1000 sxs (TOC @ 150')			
7-7/8"	5-1/2, 17#, J-55 & N-80		8690'		750 sxs			
	2-3/8, 4.7#, J-55		6053					

V. 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	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1100	Length of Test 24 hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate -
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 1675	Casing Pressure (shut-in) 1675	Choke Size 2"

VI. 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

F. D. Lebo

(Signature)

District Engineer

(Title)

November 22, 1968

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 8 1969**, 19

BY *W. A. Gressett*

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.