

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

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

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

OCT 1 1982

RECEIVED

I. OPERATOR
Sun Exploration & Production Co. ✓
Address
P.O. Box 1861, Midland, Texas 79702 - 915-685-0305
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) _____
If change of ownership give name and address of previous owner _____

O. C. D.
ARTESIA, OFFICE

OCT 20 1982

O. C. D.

ARTESIA, OFFICE

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "Z" State	Well No. 1	Pool Name, Including Formation UND North Millman San Andres	Kind of Lease State, Federal or Fee	Lease No. OG-784
Location Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line of Section 12 Township 19-S Range 28-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Pipeline	Address (Give address to which approved copy of this form is to be sent) Phillips Bldg. Odessa, Texas 79760	
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. A 12 19-S 28-E	Is gas actually connected? When ASAP	

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
Date Spudded 7-8-82	Date Compl. Ready to Prod. 8-4-82	Total Depth 2922	P.B.T.D. 2882					
Elevations (DF, RKB, RT, GR, etc.) 3378.0' GR	Name of Producing Formation SAN Andres	Top Oil/Gas Pay 2560	Tubing Depth 2378					
Perforations 2592-2632	Depth Casing Shoe 2922							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	9-5/8	412	250sx					
7-7/8	5-1/2	2922	1475sx					
	2-7/8	2378						

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 7-29-82	Date of Test 9-21-82	Producing Method (Flow, pump, gas lift, etc.) Pump 1 1/2"	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 47	Water - Bbls. 112	Gas - MCF 33

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.


(Signature)

Accounting Assistant II

(Title)

September 28, 1982

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 22 1982

BY _____
Original Signed By
Lottie A. Clements
Supervisor District II

TITLE _____

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 multiple

