

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

API No OK ~~NA~~

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Sun Exploration & Production Company ✓
Address P. O. Box 1861, Midland, Texas 79702

Reason(s) for filing (Check proper box)
 New Well
 Re-completion
 Change in Ownership
 Change in Transporter of:
 Oil
 Castnhead Gas
 Dry Gas
 Condensate
 Other (Please explain)

If change of ownership give name and address of previous owner Worth Petroleum Company, P. O. Box 17406, Fort Worth, Texas 76102

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Worth Federal	Well No.	2	Pool Name, including Formation	Brushy Draw-Delaware	Kind of Lease	Federal	Lease No.	21767
Location	Unit Letter <u>B</u>	<u>990</u>	Feet From The	<u>North</u>	Line and	<u>2280</u>	Feet From The	<u>East</u>	
Line of Section	<u>22</u>	Township	<u>26-S</u>	Range	<u>29-E</u>	, NMPM,	<u>Eddy</u>	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"/>	<u>Navajo Refining Company</u>	Address (Give address to which approved copy of this form is to be sent)	<u>P. O. Drawer 159, Artesia, NM 88210</u>					
Name of Authorized Transporter of Castnhead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	<u>Conoco, Inc.</u>	Address (Give address to which approved copy of this form is to be sent)	<u>P. O. Box 2197, Houston, Texas 77001</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>H</u>	Sec. <u>22</u>	Twp. <u>26-S</u>	Range <u>29-E</u>	Is gas actually connected?	<u>NA</u>	when	<u>NA</u>

If this production is commingled with that from any other lease or pool, give commingling order number: Post ID-3
7-22-88
chy ap

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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

Mary T. Pore
(Signature)
Accounting Associate

July 11, 1988 (Date)

(Title)

(Date)

715 288-1375

OIL CONSERVATION DIVISION

APPROVED JUL 19 1988
Original Signed By Mike Williams
BY Oil & Gas Inspector
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 multiply completed wells.