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

Form C-104
Superseding Old C-104
Effective 1-1-65

Sun Oil Company - Oklahoma City District

Address

2525 NW Expressway, Oklahoma City, OK 73112

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)

Change of address - formerly operated by
Sun Oil Company, Box 1861, Midland, TX
79702 - Effective date 6-1-73

If change of ownership give name
and address of previous owner

See above

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
New Mexico Federal N	6	Basin Dakota Gas	State, Federal or Free Federal	6-14210

Location

Unit Letter M : 1190 Feet From The South Line and 1190 Feet From The WEST

Line of Section 6 Township 30-N Range 12-W, NMEM, San Juan

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Address (Give address to which approved copy of this form is to be sent)

Plateau, Inc.

Box 108, Farmington, New Mexico

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒

Address (Give address to which approved copy of this form is to be sent)

Southern Union Gathering Company

Fidelity Union Tower, Dallas, TX 75201

If well produces oil or liquids,
give location of tanks.

Unit Sec. Twp. Rge.
M 6 30N 12W

Is gas actually connected?

Yes

When

8-1-63

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Shut-In	Prod.
		X						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Testing Depth					
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of lead oil and must be equal to or exceed 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
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.

GAS WELL

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

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.

Ben Harry
(Signature) Ben Harry

Dist. Supv./Pror. & Cons.

(Title)

8-22-78

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 5 1978

BY Original Signed by A. R. Kendrick
SUPERVISOR DIST. #3

TITLE

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

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the average tests taken on the well in accordance with RULE 1101.

All portions of this form must be filled out completely for a file on new and recompleting wells.

Fill out only Sections I, II, III, and VI for change of oil well name or number, or transporter, or other such change of well.