

SANTA FE	
FILE	
DATE	
TIME	
TRANSPORTER	OIL
	GAS
OPERATION	
PRODUCTION OFFICE	

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

Form C-1104
Supersedes C-110-104 and C-110
Effective 1-1-67

Operator El Paso Natural Gas Company	
Address PO Box 990, Farmington, NM 87401	
Reason for drilling (Check proper box)	
New Well ☒	Change in Transporter oil ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sunray A	Well No. 6	Pool Name, including Formation Blanco Pictured Cliffs Ext.	State (Federal) Fee NM	Lease No. 03202
Location				
Unit Letter E	1640	Feet From The North	Line and 1175	Feet From The West
Line of Section 10	Township 30N	Range 10W	San Juan	County

III. 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)				
El Paso Natural Gas Company	PO Box 990, Farmington, NM 87401				
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas Company	PO Box 990, Farmington, NM 87401				
If well produces oil or liquids, give location of tanks	Unit E	Sec. 10	Twp. 30N	Rge. 10W	Is gas actually connected? when

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	Scale Entry	Diff. Restv.
		X	X					
Date Spudded 1-23-73	Date Compl. Ready to Prod. 6-25-73	Total Depth 3312'	P.B.T.D. 3302'					
Elevation (DB, RCP, RT, GR, etc.) 6560'GL	Name of Producing Formation Pictured Cliffs	Top Oil/Gas pay 3214'	Tubing Depth tubingless					
Perforations 3214-30' and 3240-56'	Depth Casing Shoe 3312'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	142'	129 cu. ft.					
6 3/4"	2 7/8"	3312'	425 cu. ft.					
	tubingless							

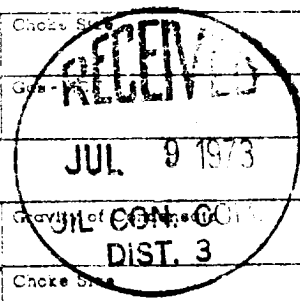
V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of test 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-Bbls.

GAS WELL

Actual Prod. Test-MMCF/D 2242	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pump, back prod) Calc. AOF	Tubing Pressure (shut-in) tubingless	Casing Pressure (shut-in) 1015	Choke Size 3/4"



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.

Drilling Clerk

June 28, 1973

OIL CONSERVATION COMMISSION

APPROVED JUL 9 1973

BY Original Signed by Emery C. Arnold

TITLE SUPERVISOR DIST. #3

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.