	<u> </u>					
DISTRIBUTION		CONSERVATION COM ION				
SANTA FE	REQUEST	T FOR ALLOWABLE	Form C - 104			
FILE		AND	Supersedes Old C-104 and C-, Effective 1-1-55			
LAND OFFICE	AUTHORIZATION TO TR	RANSPORT OIL AND NATURA				
TRANSPORTER GAS I						
OPERATOR  PROPATION OFFICE						
Sun Exploration &	Production Co.					
- · ·	P. O. Box 1861, Midland, Texas 79702					
Reason(s) for filing (Check proper be	)x)	Other (Please explain)				
New Well	Change in Frursporter of:	Name Chan	ao Only			
Recompletion Change in Ownership	Oll Day G  Casinghead Gas Conde		Oil Company			
If change of ownership give name and address of previous owner						
II. DESCRIPTION OF WELL AND						
Mathers Com	Aeil No. Poel Name, Including i		Leasec.			
Location			deral or Fee Fee E 1442			
Unit Letter N	1874 Feet From The West Us	ine and 766 Feet Fro	om The South			
Line of Section 33 T.	ownship 11-5 Range	33-E , NMPM, Lea	County			
II. DESIGNATION OF TRANSPOR	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent)					
Amoco pipeline Co.  P.C. Box 3092 Houston Toxas 77001						
Warren Petroleum 725 Gulf Bldg, Midland, Texas						
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   N		When			
If this production is commingled w V. COMPLETION DATA	ith that from any other lease or pool,					
Designate Type of Completi	ion - (X)   Oil Wei.   Gas Weil	New Well Workover Deepen	Plug Back   Same Resty, Diff, Resty.			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top CA/Gas Pay	Tubing Depth			
Perforations			Depth Casing Shoe			
	TUBING CASING AN	D CEMENTING RECORD				
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
TEST DATA AND REQUEST FOR ALLOWABLE (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	iift, etc.)			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
Actual Prod. During Test	Oil-Sbis.	Water - Bbis.	Gas - MCF			
G46 WE-	1					
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			
L CERTIFICATE OF COMPLIAN	ERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION			
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.		APPROVED Cris. Sign	10			
		BY				
		TITLE DISLL SAME				

## ٧I

Acct. Asst. II (Title) 1-1-82

(Date)

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.

Sanarate Forms C-104 must be filed for each and in multiplu

1.	DISTRIBUTION  SANTA FE  FILE  J.S.G.S.  LAND OFFICE  IRANSPORTER  GAS  OPERATOR  PRORATION OFFICE  Operator	REQUES	CONSERVATION C MI ON T FOR ALLOWABLE AND RANSPORT OIL AND NATURA	Form C-104 Supersedes Old C-104 and C- Effective 1-1-55 L GAS			
	SUN OIL COMPANY						
	P.O. Box 1861, Midland, TX 79702  Reason(s) for filing (Check groper box)						
	New Well Change in Transporter of:  Recompletion Oil Dry Gis  Change in Ownership X Casinghead Gas Condensate						
	If change of ownership give name and address of previous owner	SUN TEXAS COMPANY, P.O.	Box 4067, Midland, TX	79704			
II.	DESCRIPTION OF WELL AND LEASE.  Lease Name Well No. Foo. Name, Including Formation Kind of Lease						
	Mathers Com.	2 North Bagley	_	Lease No. E-1442			
		874 Feet From The West	the ani 766 Feet Fro	South			
			33-E , NMPM, Lea	County			
II.	DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS	County			
	Name of Authorizea Transporter of C  Amoco Pipeline Co. Name of Authorized Transporter of C	ON 🔏 or Condensate 🚞	P.O. Box 3092. Houst	proved copy of this form is to be sent;  CON, TX 77001  proved copy of this form is to be sent;			
	Warren Petroleum 725 Gulf Bldg. Midland, TX						
	If well produces oil or liquids, give location of tanks.	When					
If this production is commingled with that from any other lease or pool, give commingling order number:  V. COMPLETION DATA							
	Designate Type of Complete	tion - (X)	New Well Workover Deepen	Plug Back   Same Resty   Diff. Resty			
	Date Spudded	Date Compl. Reday to Prod.	Total Depth	P.B.T.D.			
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top OL/Gas Pay	Tubing Depth			
	Perforations			Depth Casing Shoe			
		TUBING, CASING, AN	D CEMENTING RECORD				
L	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
-			:				
7. <i>'</i>	TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be able for this d	after recovery of total volume of load o epth or be for full 24 hours;	il and must be equal to or exceed top allow			
	Date First New Cil Run To Tanks	lift, etc.)					
	Length of Test	Tubing Pressure	Casing Pressure	Choxe Size			
-	Actual Prod. During Test	Oli-Bbis.	Water - Bb.s.	Gas - MCF			
'_ '	GAS WELL	<u> </u>					
ſ	Actual Prod. Test-MCF/D	Length of Test	Bbis, Contensate/MMCF	Gravity of Condensate			
-	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Chox • Siz •			
_ ا. (	CERTIFICATE OF COMPLIAN	ice	OIL CONSERV	OIL CONSERVATION COMMISSION			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information gives		APPROVED	1901				
8	Dove is true and complete to th	e best of my knowledge and belief.	BY				

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

TITLE .

(Signature)
Production/Proration Supervisor

July 1, 1981

(Title)

(Date)

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 taxen 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.

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## NEW MEXICO OIL CONSERVATION COMMISSION Im C-104 SANTAFE Supersedes Old C-104 and C-116 REQUEST FOR ALLOWABLE Ellective 1-1-65 FILE AND U.S.G.\$. AUILIJRIZATION TO TRANSPORT OIL AND IL FURAL GAS LAND OFFICE OH TRANSPORTER GAS OPERATOR PRORATION OFFICE Operator SUN TEXAS COMPANY Address P. O. Box 4067 Reason(s) for Isling (Check proper box) 79704 Texas Midlard, Other (Please explain) New Well Oil Dry Gas Recompletion Change in Ownership X Condensate Casinghead Gas If change of ownership give name 79704 TEXAS PACIFIC OIL COMPANY, INC. P. O. Box 4067 Midland, TX. and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease ding Formation North Bagley Kenn State, Federal or Fee E-1442 : 1874 Feet From The West Line and 766 11-5 Range 33-E , NMPM, Township Line of Section II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS address (Give address to which approved copy of this form is to be sent) Pipeline AMOCO 309a Houston P.O. Box or Liv Gas Guff Bldg If well produces oil or liquids give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order numbers V. COMPLETION DATA Plug Back | Same Res'v. Diff. Res'v. New Well Workover Oll Well Gas Well Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Top C!1/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, CR, etc.) Depth Casing Shoe Perforations TUBING CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUEING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top alloable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bbls. Cil-Bble. Actual Prod. During Test GAS WELL Gravity of Condensate Actual Prod. Test-MCF/D Bbls. Condensote/MMCF Length of Test Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Wethod (pitot, back pr.) OIL CONSERVATION COMMISSION

VI. CERTIFICATE OF COMPLIANCE

SEP 12 1930

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.

(Title)

(Doie)

Regional Operations Superintendent/West

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

Org. Signed by Jerry Sexton Dist L Sup

APPROVED

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Separate Forms C-104 must be filed for each pool in multiply