

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Petroleum production Management, Inc.		Well API No. 30-025-31017
Address Suite 200/Sutton Place Bldg. Wichita, Kansas 67202		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) CASINGHEAD GAS MUST NOT BE PLACED AFTER 3-1-91 UNLESS AN EXCEPTION TO REGS. IS OBTAINED		
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Recompletion <input type="checkbox"/>		
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator		
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sunray 682 Ltd.	Well No. 6	Pool Name, including Formation Lane San Andres	Kind of Lease State, Leasehold <input checked="" type="checkbox"/> Leasehold	Lease No. L-332
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>36</u> Township <u>9-S</u> Range <u>33-E</u> , NMPM, Lea 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"/> Phillips Petroleum Company --Truck	Address (Give address to which approved copy of this form is to be sent) P.O. Box 5400 Bartlesville, Okla. 74005-5400					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589 Tulsa, Okla. 74100					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 36	Twp. 9S	Rge. 33E	Is gas actually connected? No	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 10-22-90	Date Compl. Ready to Prod. 12-1-90		Total Depth 4770'		P.B.T.D. 4703'			
Elevations (DF, RKB, RT, GR, etc.) 4286' GR 4297.6' RKB	Name of Producing Formation San Andres		Top Oil/Gas Pay 4640'		Tubing Depth 4702'			
Perforations 4640' - 4664'					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		481'		275			
7 7/8"	5 1/2"		4746'		150			
---	2 7/8"		4702'		---			

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 Tank 12-12-90	Date of Test 12-19-90	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 25#	Casing Pressure 25#	Choke Size 2"
Actual Prod. During Test	Oil - Bbls. 30	Water - Bbls. 100	Gas- MCF 10

GAS WELL

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

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Gary T. Cothran
Signature
Gary T. Cothran District Superintendent
Printed Name
1-4-91
Date
675-2478
Telephone No.

OIL CONSERVATION DIVISION

JAN 17 1991

Date Approved

By ORIGINAL SIGNED BY GARY SEXTON

Title DISTRICT SUPERVISOR

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

JAN 07 1991

FOR
HONORARY