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PRODUCTION OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hebbs, N.M.

12-7-62

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Sunray DX Oil Company

Y. F. Bowley

Well No. **3**, in **NW** $\frac{1}{4}$ **NE** $\frac{1}{4}$,

(Company or Operator)

(Lease)

San Andres Pool

J, Sec. **12**, T. **8S**, R. **34E**, NMPM, **Hebbs, N.M.**

Unit Letter

Roosevelt

County. Date Spudded **11-20-62** Date Drilling Completed **11-29-62**

Elevation **4259 DF** Total Depth **4700** PBDT **4666**

Top Oil/Gas Pay **4574** Name of Prod. Form. **San Andres**

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

PRODUCING INTERVAL -

Perforations **4574-76, 4595-97, 4602-05, 4610-13, 4623-25, 4635-39**

Open Hole **-** Depth **4699** Depth **4615**
Casing Shoe Tubing

8 OIL WELL TEST -

Natural Prod. Test: **91** bbls. oil, **0** bbls water in **13** hrs, **0** min. Size **28/64**

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **91** bbls. oil, **0** bbls water in **13** hrs, **0** min. Size **28/64**

GAS WELL TEST -

Natural Prod. Test: **91** MCF/Day; Hours flowed **13** Choke Size **28/64**

Method of Testing (pitot, back pressure, etc.): **28/64**

Test After Acid or Fracture Treatment: **91** MCF/Day; Hours flowed **13**

Choke Size **28/64** Method of Testing: **28/64**

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **2000 Gal BDA & 20,000 gal frac**

Casing Press. **950** Tubing Press. **125** Date first new oil run to tanks **12-6-62**

Cil Transporter **Magnolia Pipeline Co.**

Gas Transporter **see back for deviations**

Remarks: **see back for deviations**

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved **12-7**, 19 **62**

Sunray DX Oil Company

(Company or Operator)

By: **R. E. Statton**
(Signature)

Title **District Engineer**

Send Communications regarding well to:

Name **C. T. McClanahan**

Box 128, Hebbs, N.M.

OIL CONSERVATION COMMISSION


By: **see back for deviations**

Title **see back for deviations**

Deviation Record

<u>Depth</u>	<u>Degrees</u>
361	1/2
1769	3/4
2066	1/2
2949	1/2
3601	1
3961	1/2
4064	1/4
4300	1/2
4610	1/2
4700	3/4

I, R. E. Statton, hereby certify the above deviations to be true and correct to the best of my knowledge.


R. E. Statton

Subscribed and sworn to before me on this 8th. day of December, 1962.
Notary Public in and for Lea County, New Mexico


MY COMMISSION EXPIRES MAY 27, 1964