I DE CONTES		i	
DISTRIBUTION			
SANTA FE			
FILE			
J.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

January 25, 1982

(Date)

NEW MEXICO CIL CONSERVATION COMM. ...ION

SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-1	
J.S.G.S.	AUTHORIZATION TO TR	AND AND Effective 1-1-65 JTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
LAND OFFICE	ADTHORIZATION TO TRA	ANSPORT UIL AND NATURAL GA	45	
TRANSPORTER OIL				
GAS				
OPERATOR				
Operator				
Sun Exploration & P	roduction Co.			
P. O. Box 1861, Mid	land Texas 79702			
Reason(s) for filing (Check proper b		Other (Please explain)		
New Well	Change in Transporter of:	- Namo Chango Only		
Recompletion	OII Dry Go	Name Change Only From: Sun Oil C		
Change in Ownership	Casinghead Gas Conde	nsate		
f change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AN	D LEASE Well No. Pool Name, Including F	ormation Kind of Lease		
New Mexico "AY"State		1 Andres Associated, Federal	Lease No.	
Location	1 Toda Edwer Sar	T Andres Associated	State E-10047	
Unit Letter A ;	990 Feet From The North Lir	ne and 990 Feet From Th	ne <u>East</u>	
Line of Section 36	Fownship 7-S Range	35-E . NMPM. Roos	ovol+	
Line of Section	Fownship /-3 Range	35-E , NMPM, ROOS	evelt County	
	RTER OF OIL AND NATURAL GA			
Name of Authorized Transporter of (Address (Give address to which approve	,	
Mobil Pipeline Compar Name of Authorized Transporter of C	NY Casinghead Gas ▼ or Dry Gas	P. O. Box 900 Dallas Address (Give address to which approve	Texas	
Cities Service Oil Co	ompany	1437 S. Boulder, Tulsa,		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When		
give location of tanks.	; B 36 7-S 35-E	Yes ! 1	0-25-65	
f this production is commingled COMPLETION DATA	with that from any other lease or pool,	give commingling order number:		
Designate Type of Comple	tion — (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Rest	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
	TUDING CATING AN	D CENENTING BECORD		
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT	
, HOLE SIZE			SKORO OZINZIVI	
		<u> </u>		
TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a able for this de	ifter recovery of total volume of load oil a epth or be for full 24 hours)	nd must be equal to or exceed top allo	
Date First New Cil 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 - MCF	
GAS WELL	It was at Maria	LBMs Gashara And GB		
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	
ODDANDA AND OD COMPT	NOT	011 0011757111	FION COMMISSION	
CERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	FION COMMISSION	
hereby certify that the rules an	d regulations of the Oil Conservation	APPROVED FED 3	198 2 , 19	
Commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		Orig. Sign	ed by	
soove is true and complete to t	me beat of my knowledge and belief.	Jerry Sext	OD	
		TITLE Dist 1. Su	g*·	
11- 1	Par	This form is to be filed in co		
Marin &	enature)	If this is a request for allows well, this form must be accompan	ible for a newly drilled or deepens ied by a tabulation of the deviation	
Senior Accounting A	ssistance	tests taken on the well in accord	ance with RULE 111.	
	Title)	All sections of this form mus	t be filled out completely for allow	

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.

Senerate Forms C-104 must be filed for each cool in multiply