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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Nov 8 / 10 PM '65

Operator Sunray Oil Company	
Address P. O. Box 1416, Roswell, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Allowable increase due to issuance of temporary field rules and casinghead gas connection.	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE	
Lease Name New Mexico State "A"	Well No. 6
Formation Todd-San Andres	
Kind of Lease State	
State, Federal or Fee	
Location I 1980 South 660 East	
Unit Letter 36	
Feet From The 73	
Line and 35E	
Feet From The Roosevelt	
Line of Section 36	
Township 73	
Range 35E	
NMPM, Roosevelt	
County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Transporter of Oil Seurlock Oil Co.	Address (Give address to which approved copy of this form is to be sent) Rm. 428, Mid-American Bldg., Midland, Texas
Name of Transporter of Casinghead Gas Capitlan, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 6598, Dallas, Texas
If well produces oil or liquids, give location of tanks.	Unit B
Sec 36	T 73
R 35E	Is gas actually connected? Yes
When 10-25-65	

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"/>
Date Spudded 5-23-65	Date Completed 6-4-65
Pool Todd-San Andres	Name of Producing Formation San Andres
Perforation One hole @ 4325, 4317, 4303, 4298, 4287, 4285, 4282, 4276	Total Depth 4370
TUBING, CASING, AND CEMENTING RECORD	
12 1/4 7 7/8	CASING & TUBING SIZE 8 5/8
DEPTH SET 4,372	
SACKS CEMENT 250	
200	
4,276	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL	
Date First Test 6-4-65	Date of Test 6-5-65
Length of Test 2 1/2 hrs.	Producing Method (Flow, pump, gas lift, etc.) Flow
Actual Production 273 Bbls.	Tubing Pressure 180
Casing Pressure 0	Choke Size 2 1/2
Oil-Bbls 273 Bbls.	Water-Bbls 0
Gas-MCF 223.9	

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

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.	
B. F. Brawley	
District Engineer	
November 8, 1965	
(Date)	
OIL CONSERVATION COMMISSION	
APPROVED _____, 19 _____	
BY _____	
TITLE _____	
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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.	
Separate Forms C-104 must be filed for each pool in multiply completed wells.	