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DISTRIBUTION				
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWABLE Floating 1-104 RECUEST FOR ALLOWABLE			
FILE		AND	Ettacitia I-1-03	
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND HATURA	ao aos am 'st	
LAND OFFICE			· ·	
TRANSPORTER GAS		in moneya		
OPERATOR	SUNRAY DX OIL CO.	ि न म्		
PROBATION OFFICE	NAME CHANGED TO:			
Operator Sunray DX Oil Con	girl Olt. CO DX DI	VISION	0	
Address	,			
•	Roswell, New Mexico 882	01 Led 2580,	Callas Led 75221	
Reason(s) for filing (Check proper box,)	Other (Pleasers spining)	77/2 4-1-70	
New Well	Change in Transporter of:	SUN OIL COM	PARY DX BIVISION	
Recompletion	Oil Dry Ga	HI NAME	CHARBED 10	
Change in Ownership	Casinghead Gas X Conder	neate	IL COMPANY	
If change of ownership give name and address of previous owner				
DESCRIPTION OF WELL AND	LEASE	VI-1 of		
Lease Name	Well No. Pool Name, Including F		_	
New Mexico "AZ" State	5 Chaveroo	San Andres State, F	oderal or Foo State K-3935	
Location Unit Letter D;	660 Feet From The North Lin	se and 660 Feet F	rom TheWest	
Line of Section 33 Tov	waship 7-S Range	33-Е , ммрм,	Roosevelt County	
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS		
Name of Authorized Transporter of Oil Mobil Pipeline Company		Box 900. Dallas. Tex	approved copy of this form is to be sent)	
Name of Authorized Transporter of Cas	singhead Gas X or Dry Gas	Address (Give address to which	approved copy of this form is to be sent)	
Cities Service Oil Com	pany	Cities Service Bldg.	, Bartleville, Oklahoma	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When	
give location of tanks.	E 33 7-S 33-E	Yes	6-6-6 6	
	th that from any other lease or pool,	give commingling order numbers		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepe	n Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Completion	on = (X)			
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	<u> </u>		Depth Casing Shoe	
	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		<u> </u>		
TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of loa epth or be for full 24 hours)	d oil and must be equal to or exceed top allow-	
OII, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, 4	gas lift, etc.)	
		Cooker Bearing	Choke Size	
Length of Test	Tubing Pressure	Casing Pressure	Choice Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
	<u> </u>	1		
GAS WELL		Dila Carlana Anger	Cravity of Condessate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
		Cooling December (Churt-In)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	CHORT CLAY	
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
		APPROVED	, 19	

Vi.

II.

III.

IV.

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.

John L	Jacking e	John	Hastings
Distr	(Signature) ict Engineer		
	(Title)		

(Date)

July 6, 1967

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 only Sections I, II, III, and VI 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.