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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

SEP 29 1 02 PM '65

RE-SUBMITTED FOR NEW FIELD DESIGNATION

I. Operator
Sunray DX Oil Company

Address
P. O. Box 1416, Roswell, New Mexico

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico State "AZ"	Well No. 8	Pool Name, including Formation Chaveroo San Andres	Kind of Lease State, Federal or Fee State
Location Unit Letter E ; 1980 Feet From The North Line and 660 Feet From The West Line of Section 34 , Township 7S Range 33E , NMPM, Roosevelt 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3120, Midland, Texas
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit E Sec. 33 Twp. 7S 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 X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 8-21-65	Date Compl. Ready to Prod. 9-1-65	Total Depth 4529	P.B.T.D. 4492					
Pool Chaveroo	Name of Producing Formation San Andres	Top Oil/Gas Pay 4203	Tubing Depth 4361					
Perforations 4203, 4230, 4263, 4275, 4288, 4293, 4300, 4308, 4321, 4327, 4334, 4351	TUBING, CASING, AND CEMENTING RECORD		Depth Casing Shoe 4523					
HOLE SIZE 11 7 7/8	CASING & TUBING SIZE 8 5/8 4 1/2 2 3/8	DEPTH SET 368 4529 4361	SACKS CEMENT 250 200					

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)

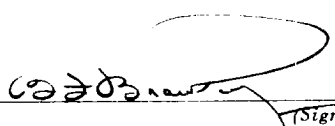
Date First New Oil Run To Tanks 9-1-65	Date of Test 9-2-65	Producing Method (Flow, pump, gas lift, etc.) Flow
Length of Test 24 hrs	Tubing Pressure 180	Casing Pressure -
Actual Prod. During Test 200	Oil-Bbls. 194	Water-Bbls. 6
		Choke Size 18/64
		Gas-MCF 126

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	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
(Signature)
District Engineer
(Title)
September 27, 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.