

NEW MEXICO OIL CONSERVATION COMMISSION  
DISTRIBUTION  
SANTA FE  
FILE  
O.S.G.S.  
LAND OFFICE  
TRANSPORTER  
OIL  
GAS  
OPERATOR  
PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND 1100'S RULE O. C. C.  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
JUN 15 11 57 AM '66

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

I. Sunray DX Oil Company  
Address P. O. Box 1116 - Roswell, New Mexico  
Reasons for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Oil ☐ Dry Gas ☐  
Casinghead Gas ☒ Condensate ☐ Other (Please explain) New Connection  
If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE  
Lease State New Mexico State "AZ" State Well No. 13 Pool Name, including Formation Chaveroo San Andres Kind of Lease State, Federal or Fee State  
Location  
Section 34 Township 7S Range 33E NMPM, Roosevelt County  
Foot Letter A 660 Feet From The N Line and 660 Feet From The E

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)  
Magnolia Pipeline Corp. Box 1073 - Mobil Bldg. - Midland, Texas  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)  
Capitlan, Inc. Box 6598 - Dallas, Texas  
If well produces oil or liquids, give location of tanks. Unit E Sec. 33 Twp. 7S Rge. 33E Is gas actually connected? Yes When 6-6-66

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 ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v. ☐ Diff. Res'v. ☐  
Date Spudded \_\_\_\_\_ Date Compl. Ready to Prod. \_\_\_\_\_ Total Depth \_\_\_\_\_ P.B.T.D. \_\_\_\_\_  
Pool \_\_\_\_\_ Name of Producing Formation \_\_\_\_\_ Top Oil/Gas Pay \_\_\_\_\_ Tubing Depth \_\_\_\_\_  
Perforations \_\_\_\_\_ Depth Casing Shoe \_\_\_\_\_  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE \_\_\_\_\_ CASING & TUBING SIZE \_\_\_\_\_ DEPTH SET \_\_\_\_\_ SACKS CEMENT \_\_\_\_\_

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 \_\_\_\_\_ 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  
Actual Prod. Test-MCF/D \_\_\_\_\_ Length of Test \_\_\_\_\_ Bbls. Condensate/MMCF \_\_\_\_\_ Gravity of Condensate \_\_\_\_\_  
Testing Method (pilot, 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)  
6-15-66  
(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.