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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
DEC 29 4 07 PM '65

Operator Sunray Oil Company	
Address P. O. Box 1416, Roswell, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input checked="" 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"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

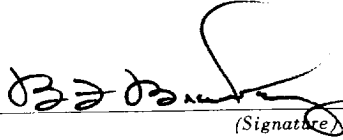
Lease Name New Mexico State "AZ"		Well No. 14	Pool Name, Including Formation Chaverro San Andres	Kind of Lease State, Federal or Fee	State State
Location					
Unit Letter N	1980	Feet From The N	Line and 660	Feet From The East	
Line of Section 34	Township 7S	Range 33E	NMPM, Roosevelt		County


Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Magnolia Pipeline Corp.		Address (Give address to which approved copy of this form is to be sent) Box 1073, Mobil Bldg, Midland, Texas			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None		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					

Designate Type of Completion - (X)						Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
X								X					
Date Spudded 12-10-65		Date Compl. Ready to Prod. 12-27-65		Total Depth 4480		P.B.T.D. 4427							
Pool Chaverro San Andres		Name of Producing Formation San Andres		Top Oil/Gas Pay 4161		Tubing Depth 4177							
Perforations 4161, 87, 4215, 26, 51, 67, 78, 84, 90, 97, 4312, 22, 36, 42, 52						Depth Casing Shoe 4472							
TUBING, CASING, AND CEMENTING RECORD													
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT							
12 1/2		8 5/8		361		250							
7 7/8		4 1/2		4472		200							
		2 3/8		4177		0							

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 12-27-65		Date of Test 12-28-65		Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs		Tubing Pressure 175		Casing Pressure 550	
Actual Prod. During Test 251 bbl		Oil - Bbls. 251		Water - Bbls. 0	
				Choke Size 22/64	
				Gas - MCF 234	

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. Dravley	
(Signature)	
District Engineer	
(Title)	
December 28, 1965	
(Date)	

OIL CONSERVATION COMMISSION	
APPROVED  DEC 29 1965, 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.	