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Form C-105
Revised 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.

1a. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
b. TYPE OF COMPLETION NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name New Mexico "J" State	
2. Name of Operator Sun Oil Company		9. Well No. 2	
3. Address of Operator P. O. Box 1861, Midland, Texas 79701		10. Field and Pool, or Wildcat Cato San Andres	
4. Location of Well UNIT LETTER F LOCATED 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE OF SEC. 36 TWP. 7-S RGE. 30 E NMMP		12. County Chaves	
15. Date Spudded 5-25-74	16. Date T.D. Reached 5-31-74	17. Date Compl. (Ready to Prod.) 6-15-74	18. Elevations (DF, RKB, RT, GR, etc.) GR 4200.1'
19. Elev. Casinghead 4200'		23. Intervals Drilled By Rotary Tools 0-3750'	
20. Total Depth 3750'	21. Plug Back T.D. 3704'	22. If Multiple Compl., How Many	25. Was Directional Survey Made No
24. Producing Interval(s), of this completion - Top, Bottom, Name 3560-3679 Cato San Andres			27. Was Well Cored No
26. Type Electric and Other Logs Run DLL, GR, CNL-FDC			
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE
8-5/8"	24#	297'	12-1/4"
4-1/2"	9.5#	3746'	7-7/8"
CEMENTING RECORD		AMOUNT PULLED	
225 sx Cl. C circ to surf		None	
400 sx Cl. C		None	
29. LINER RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT
30. TUBING RECORD		PACKER SET	
SIZE	DEPTH SET		
2-3/8"	3691'		
31. Perforation Record (Interval, size and number)			
3655-3679 w/3-3/8" Sel. Fire Csg. Gun, 7 Holes			
12894 gals Super Frac w/10500# 20-40 sd w/3000 gal Pad.			
3560-3619 w/3-1/8" Wesjet, 13 Holes			
3560-3619 Acdz. w/2000 gals 15% NEHCL. Frac w/30000 gals oil frac & 22500# 20-40 sd.			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED	
3655-3679		Acdz. w/2000 gals 15% NEHCL. Frac w/30000 gals oil frac & 22500# 20-40 sd.	
33. PRODUCTION			
Date First Production 6-24-74	Production Method (Flowing, gas lift, pumping - Size and type pump) Pump w/1-1/2" Insert		Well Status (Prod. or Shut-in) Producing
Date of Test 8-13-74	Hours Tested 24	Choke Size -	Prod'n. For Test Period 12.0
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate 12.0	Gas - MCF NAG
			Water - Bbl. 14
			Gas - Oil Ratio TSTM
			Oil Gravity - API (Corr.) 20.3
34. Disposition of Gas (Sold, used for fuel, vented, etc.) Used for Lease Fuel			Test Witnessed By
35. List of Attachments C-104, Inclination Survey			
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.			
SIGNED <i>Charles May</i>		TITLE Proration Analyst	
		DATE 8-23-74	

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	GAS	
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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

I.

Operator Sun Oil Company		
Address P. O. Box 1861, Midland, Texas 79701		
Reason(s) for filing (Check proper box) New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/>		Other (Please explain) CASINGHEAD GAS MUST NOT BE FLARED AFTER 10/28/74 UNLESS AN EXCEPTION TO R-4078 IS OBTAINED.
Change in Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/>		Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of ownership give name and address of previous owner		

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "J" State	Well No. 2	Pool Name, Including Formation Cato San Andres	Kind of Lease State, Federal or Fee State	Lease No.
Location Unit Letter F ; 1980 Feet From The North Line and 1980 Feet From The West Line of Section 36 Township 7 S Range 30 E , NMPM, Chaves 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"/> Mobil Oil Corporation (Trucks)	Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221	
Name of Authorized Transporter of Casinghead Gas <input checked="" 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 F	Sec. 36
	Twp. 7 S	Rge. 30 E
	Is gas actually connected? When	

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-25-74	Date Compl. Ready to Prod. 6-15-74		Total Depth 3750'		P.B.T.D. 3704'			
Elevations (DF, RKB, RT, GR, etc.) GR 4200.1	Name of Producing Formation Cato San Andres		Top Oil/GAS 2760'		Tubing Depth 3691'			
Perforations 3560-3679					Depth Casing Shoe 3750'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		297'		225 sx Cl. C			
7-7/8"	4-1/2"		3746'		circ to surf.			
-	2-3/8"		3691'		400 sx Cl. C.			

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 6-24-74	Date of Test 8-13-74	Producing Method (Flow, pump, gas lift, etc.) Pump w/1-1/2" Insert	
Length of Test 24 Hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 26 Bbls. Fluid/24 Hrs.	Oil - Bbls. 12.0	Water - Bbls. 14	Gas - MCF NAG

GAS WELL

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

Charles Gray
(Signature)
Proration Analyst
(Title)
8-23-74
(Date)

OIL CONSERVATION COMMISSION
APPROVED AUG 28 1974, 19____
BY [Signature]
TITLE **SUPERVISOR DISTRICT I**

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.

THE OIL FIELD IN THE
STATE OF TEXAS
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