

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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DISTRIBUTION	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator MURPHY OPERATING CORPORATION	
Address P. O. Drawer 2648, Roswell, New Mexico 88201	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change of Ownership effective 12-1-84
Recompletion ☐	
Change in Ownership ☒	
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	

If change of ownership give name and address of previous owner **One Barclay Plaza, Suite 800
SUNDANCE OIL EXPLORATION COMPANY, 1675 Larimer Street, Denver, CO 80202**

DESCRIPTION OF WELL AND LEASE				
Lease Name Ingram Federal	Well No. 10	Pool Name, including Formation Tom Tom San Andres	Kind of Lease Federal State, Federal or Fee	Lease No. 15678
Location Unit Letter C : 330 Feet From The North Line and 1650 Feet From The West Line of Section 5 Township 8 South Range 31 East , NMPM, Chaves County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					SCURLOCK PERMIAN CORP EFF 9-1-91	
Name of Authorized Transporter of Oil ☒ or Condensate ☐ The Permian Corporation Permian (Eff. 9-1-84)			Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, Texas 77001			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Cities Service Company			Address (Give address to which approved copy of this form is to be sent) P. O. Box 300, Tulsa, Oklahoma 74102			
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 5	Twp. 8-S	Rge. 31-E	Is gas actually connected? When yes	

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

COMPLETION DATA	
Designate Type of Completion -- (X)	☐ Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Resv. ☐ Diff. Resv.
Date Spudded	Date Compl. Ready to Prod.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation
Perforations	Top Oil/Gas Pay
	Tubing Depth
	Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 (flow, lock pt.)	Tubing Pressure (shot-in)	Casing Pressure (shot-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED JAN 14 1985 , 19	
MURPHY OPERATING CORPORATION		BY ORIGINAL SIGNED BY JERRY SEXTON	
A. J. Murphy (Signature) President (Title)		TITLE DISTRICT 1 SUPERVISOR	
January 4, 1985 (Date)		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 deviated tests taken on the well in accordance with RULE 111. All reactions 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.	

RECEIVED

JAN 10 1985

C.C.D.
HOBBS OFFICE