

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROMOTION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2083

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
Sun Exploration & Production Company

Address
P.O. Box 1861 Midland, Texas 79702

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> 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

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name State Land 76	Well No. 5	Pool Name, Including Formation North Anderson Ranch Canyon	CISCO	Kind of Lease State, Federal or Fee	State	Lease No.
Location Unit Letter <u>J</u> : <u>1650</u> Feet From The <u>East</u> Line and <u>4290</u> Feet From The <u>South</u> Line of Section <u>2</u> Township <u>16S</u> Range <u>32E</u> , NMPM, Lea 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"/> Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) 1609 Main, Eunice, NM 88231
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 460, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks.	Unit : <u>J</u> Sec. : <u>2</u> Twp. : <u>16S</u> Rge. : <u>32E</u> Is gas actually connected? <u>Yes</u> When : <u>5/30/85</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have
been complied with and that the information given is true and complete to the best of
my knowledge and belief.

Velma Reyes
(Signature)

Sr. Accounting Assistant

6/5/85

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED

JUN 10 1985

BY

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT 1 SUPERVISOR

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 deviatric
tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow-
able 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 multipl
completed wells.

IV. COMPLETION DATA

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 4/9/85	Date Compl. Ready to Prod. 5/24/85	Total Depth 10629		P.B.T.D. 10629 10,590					
Elevations (DF, RKB, RT, GR, etc.) 4301.9 GR	Name of Producing Formation Canyon	Top Oil/Gas Pay 10479		Tubing Depth 10350					
Perforations 10484-10494 Canyon				Depth Casing Shoe 10350					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	12 3/8	405	400 SXS (1' C)
11	9 5/8	4200	1450 SXS Howco Lite + 200 S. C. H.
7 7/8	5 1/2	10629	350 SXS Howco Lite + 350 S. C. H.
	2 7/8		

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 5/25/85	Date of Test 6/3/85	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 200	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 428	Water - Bbls. 116	Gas - MCF 550

GAS WELL

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

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WELL NAME AND NUMBER State Land "76" #3 610

LOCATION Section 1, T16S, R32E, Lea County, New Mexico
 (New Mexico give U.S.T.&R. - Texas give S, BLK, SURV. and TWP)

OPERATOR SUN Exploration and Production Company

DRILLING CONTRACTOR MORANCO Drilling, Inc.

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

Degrees and Depth		Degrees and Depth		Degrees and Depth		Degrees and Depth	
1/2	215	1	5717	1 1/2	9881		
1/2	504	1/4	5859	1 1/2	9960		
1/2	905	1/2	6343	1	10629		
1	1406	1/4	6842				
1	1903	3/4	7335				
1/2	2490	3/4	7829				
1/4	2990	3/4	8014				
3/4	3490	2 3/4	8540				
3/4	4051	2 1/4	8641				
1/4	4200	2 1/4	8766				
1/2	4689	2	9074				
3/4	5200	1 1/2	9338				

Drilling Contractor MORANCO Drilling, Inc.

By Wiley Gilmore
 Wiley Gilmore - Marketing Manager

Subscribed and sworn to before me this 16th day of May 19 85

My Commission expires:

January 30, 1989

Susie Branyon
 Notary Public Susie Branyon
 Lea County, New Mexico

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