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┝	NO. OF COPIES RECEIVED			
ŀ	DISTRIBUTION SANTA FE			Form C-104 Supersedes Old C-104 and C-110
ŀ	FILE	REQUEST	OR ALLOWABLE	Effective 1-1-65
ŀ	U.S.G.S.	ATTHODIZATION TO TRA	NSPORT OIL AND NATURAL G	
ŀ		AUTHORIZATION TO TRAI		
ł	01L			
	TRANSPORTER GAS			
ł	OPERATOR			
1	PRORATION OFFICE			
	Operator			
	Estoril Producing Corporation			
	Address			
	400 W. Illinois #1600, N	Midland, Texas 79701		
	Reason(s) for filing (Check proper box)		Other (Please explain)	NOT BE
	New Well	Change in Transporter of:	T	AS MUST NOT BE $1-1-\frac{1}{2}$
	Recompletion	Oil Dry Gas Casinghead Gas Conden:	CASING BAD	
TOUR DES AN BACEP HON			CEPTION 10 M LOT	
DESIGNATED BELOW, IF YOU DO NOT CONCUR				
NOTIFY THIS OFFICE.				01 33 actes
п.	DESCRIPTION OF WELL AND L	Well No.; Pool Name, Including Fo	rmation 2-1.87 Kind of Leas	
	h^2 χ^2 State, Federal or Fee Fee			
	Anderson '6'			
	Unit Letter <u> </u>	restromine webe Line		
	Line of Section 6 Tow	nship 16S Range	37Е , ММРМ,	Lea County
ш.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	<u>s</u>	
	Name of Authorized Transporter of Oil	🗴 or Condensate 🗌	Address (Give address to which appro	
	Sun Refining & Marketing Company P.O. Box 2039, Tulsa, Oklahoma 74102 Name of Authorized Transporter of Casinghead Gas () or Dry Gas Address (Give address to which approved copy of this form is to be sent)			
	NA			en .
	If well produces oil or liquids,	Unit Sec. Twp. Ege.	to gas actuary comments	
	give location of tanks.	U 6 16S 37E		December 1, 1986
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA	Oli Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
	Designate Type of Completio	$\mathbf{n} = (\mathbf{X})$		
	0 /1	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Date Spudded		11,750'	11,704'
	8-29-86	10-24-86 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.)		11,553'	11.384
	3874 KB	Strawn	11,000	Depth Casing Shoe
	Perforations 11,553 - 11,593'			11,750'
	TUBING, CASING, AND CEMENTING RECORD			
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	HOLE SIZE	13-3/8	375	395 sx Cl 'C' + 2% CaCl
	<u>17½</u> 11	8-5/8	4249	1600 sx Pacesetter &
		0 97 0		200 sx Cl 'C'
	7-7/8	5 ¹ 3	11750	530 sx Cl 'H'
	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 all able for this depth or be for full 24 hours)			
V.				
Date First New Oil Run To Tanks Date of Test Producing Method (Fic			Producing Method (Flow, pump, gas l	171, etc./
		10-27-86	Flowing	Choke Size
	10-24-86	10-27-86 Tubing Pressure	Casing Pressure	
	24 hrs	350 psi	0 Water-Bble.	16/64"
	Actual Prod. During Test	Oil-Bbis.		
	268	268	0	
	·			
	GAS WELL		Bbis, Condensate/MMCF	Gravity of Condensate
	Actual Prod. Test-MCF/D	Length of Test	DDIB' CONTRACAL MIMOL	
			Casing Pressure (Shut-in)	Choke Size
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Caring Pressure (Budd-1-)	
VI	CERTIFICATE OF COMPLIANCE		OIL CONSERV	ATION COMMISSION
	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 beat of my knowledge and belief.			1300
			BY	
			This form is to be filed in compliance with RULE 1104.	
	(l.M. Suchen		for a newly drilled or deepened	
	(Signature) Vice President - Engineering (Title) 11-4-86		well, this form must be accompanied by a tabulation of the test 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.	
	(D	(Date)		ist be filed for each pool in multiply
			completed wells.	