

TIGHT HOLE

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Sun Exploration & Production Co.

Address
P. O. Box 1861, Midland, Texas 79702

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership
☐ Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)
 Well originally permitted as a wildcat (Strawn). Well completed in the Canyon Reservoir.

CASINGHEAD GAS MUST NOT BE FLARED AFTER 1-1-88 UNLESS AN EXCEPTION TO B-4070 IS OBTAINED.

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 Arreguy 25	Well No. 1	Pool Name, including Formation Townsend Permo Upper Penn	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter <u>A</u> : <u>810</u> Feet From The <u>North</u> Line and <u>510</u> Feet From The <u>East</u>				
Line of Section <u>25</u> Township <u>15-S</u> Range <u>24-E</u> <u>34</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"/> Sun Refining & Marketing Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2039, Tulsa, Oklahoma 74102
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Under Negotiation	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 <u>A</u> Sec. <u>25</u> Twp. <u>15-S</u> Rge. <u>34-E</u>	Is gas actually connected? <u>No</u> When

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.

Maria L. P.
(Signature)
Accounting Associate
(Title)
11-1-87
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 5 1987, 19
BY Orig. Signed by
Paul Kautz
TITLE Geologist

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-2-87	Date Compl. Ready to Prod. 10-15-87		Total Depth 11,340		P.B.T.D. 11,320				
Elevations (DF, RKB, RT, GR, etc.) 4035.5 BR	Name of Producing Formation Canyon		Top Oil/Gas Pay 11,054		Tubing Depth 11,085				
Perforations 11,200'-11,264'						Depth Casing Shoe 11,340			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/2"	13-3/8"		519'		525 sxs "C"				
12-1/4 & 11"	8-5/8"		4800'		2600 sxs Pacesetter Lite				
7-7/8"	5-1/2"		11340'		1100 sxs "H"				
	2-7/8"		11,085'						

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 10-27-87	Date of Test 11-1-87	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 350#	Casing Pressure	Choke Size 18/64"
Actual Prod. During Test	Oil - Bbls. 367	Water - Bbls. 66	Gas - MCF 469

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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