	1460	i										
DISTRIBUTIO	ON.		$\sqcap$									
SANTA FE												
FILE												
U.S.G.S.												
LAND OFFICE												
TRANSPORTER	OIL											
	GAS											
OPERATOR												
PRORATION OFFICE												
Chetatot												
Sun Oil Company Address P.O. Box 1861 - Midland,												
							Reason(s) for filing (Check proper box)					
							New We!l					
Recompletion												
Change in Ownership	- <u></u>											

## NEW MEXICO OIL CONSERVATION COMMIT IN

Fcm C-104

	SANTA FE FILE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65				
	U.S.G.S.	AND .  AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS .						
	LAND OFFICE	AUTHURIZATION TO TRANSPORT OIL AND NATURAL GAS .						
	TRANSPORTER GAS							
	OPERATOR							
ł.	PRORATION OFFICE  Operator							
	Sun Oil Company Address							
	P.O. Box 1861 - Midland, Texas 79701							
	Reason(s) for filing (Check proper box)		Other (Please explain)					
	New We!l X Recompletion	Change in Transporter of:  Oil Dry Gas	. 🖼					
	Change in Ownership	Casinghead Gas Conden	<b>≒</b>	•				
	If change of ownership give name and address of previous owner							
n.	DESCRIPTION OF WELL AND I	Well No : Pool Name Including Fo	ormation Kind of Lease	Lease No.				
	Shearn Federal Com.	1 Wildcat Lussi	(-11:07 + 20. 6.65) State, Federal	or Fee Federal				
	Unit Letter L ; 660 Feet From The W Line and 1980 Feet From The S							
	Line of Section 15 Township 19S Range 32E , NMPM, Lea County							
m.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	s					
	Name of Authorized Transporter of Oil		Address (Give address to which approx	ped copy of this form is to be sent)				
	The Permian Corporation	on Day Co. The	Box 1183, Houston, Tex Address (Give address to which approx	as 77001				
	Phillips Petroleum Com		Adams Bldg., Bartlesvi					
	If well produces oil or liquids,	Unit   Sec.   Twp.   P.ge.   L   15   19S   32E	Is gas actually connected? Whe					
	give location of tanks.  If this production is commingled wit	<u> </u>		None ,				
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.				
	Designate Type of Completio	n – (X) X	X					
	Date Spudded 12-7-71	Date Compl. Ready to Prod.  3-29-72	Total Depth 14330	P.B.T.D. 13030				
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth				
	Gr. 3621.3	Morrow	12181	12160 Depth Casing Shoe				
	12,231, 32, 33, 34, 35	5. 36. 37. 38. 39		13252				
			CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
	17-1/2"	16"	330'	350 Sxs.				
	15"	13-3/8" 9-5/8"	2683' 7350'	800 Sxs. 775 Sxs				
	8-1/2"	7"	7040-132521	900 Sxs				
٠٧.	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 allow							
	OIL WELL  able 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-Bbis.	Water - Bbls.	Gos-MCF				
	GAS WELL							
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate				
	990 Testing Method (pitot, back pr.)	24 hrs. Tubing Pressure(Shut-in)	Casing Pressure (Shut-in)	49.80 Chicke Size				
	Orifice Meter	3229 PSIG	1900 PSIG	18/64"				
VI.	CERTIFICATE OF COMPLIANCE	CE		ATION COMMISSION				
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED JUN \$ 1972 . 18					
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			TITLE SUPERVISOR DISTRICT I					
							~ 3 ,*	,
	Charles "	This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despended 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.						
	(Signa							
	Proration Clerk							
	5-23-72		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					
	(De	ste)						

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11.7 23 10.2

OIL CONSTRVATION COMM. HOBBS, N. d.