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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
PETROLEUM DEVELOPMENT CORPORATION
Address
9720 B Candelaria, NE, Albuquerque, New Mexico 87112
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

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 Sun McKay Federal #1	Well No. 1	Pool Name, Including Formation Undesignated Lusk Morrow	Kind of Lease State, Federal or Fee Federal
Location Unit Letter F ; 1730 Feet From The West Line and 1850 Feet From The North Line of Section 10 , Township 19S Range 32E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 838, Hobbs, New Mexico 88240					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit 10	Sec. 19S	Twp. 32E	Rge. NO	Is gas actually connected? NO	When 2/8/78

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudied 11/3/77	Date Compl. Ready to Prod. 1/14/78	Total Depth 13000		P.B.T.D. 12955					
Pool Wildcat	Name of Producing Formation Morrow Sand	Top Oil/Gas Pay 12661		Tubing Depth 12600					
Perforations 12900-904', 12920-926, 12931-935'; 12661-668, 12698-707', 12736-746		4 JSPF		Depth Casing Shoe 13000					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2"	48# 13-3/8"		435		400 sx "H" 2% gel				
11"	24# - 32# 8-5/8"		4200		550 sx LtWt, 650 "C" 4% gel				
7-7/8"	11.6# - 4 1/2"		13000		300 "H", 500 sx. HLE				
	2-3/8" tubing		12600						

V. 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 2932	Length of Test 4 hrs.	Bbls. Condensate/MMCF 118 bbls.	Gravity of Condensate 58°
Testing Method (pitot, back pr.) back pressure-4 pt.	Tubing Pressure 4000#	Casing Pressure PKR	Choke Size 16/64

VI. CERTIFICATE OF COMPLIANCE

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 best of my knowledge and belief.

Lloyd G. Wayne
(Signature)

Vice President

2/8/78

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

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 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 Sections I, II, III, and VI only 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.