Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II ≥O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410

O Rio Brazos Rd., Azzec, NM 87410		OR ALLOWAB							
	TOTRA	ANSPOHT OIL	AND NA I	ND NATURAL GAS			Na.		
alor Company					30-025-03941				
Oryx Energy Company									
ress P. O. Box 1861, Midlan	nd. Texas 7	9702							
son(s) for Filing (Check proper box)	,		Othe	t (Please explain	1)				
v Well		in Transporter of:							
	_	Dry Gas							
age in Operator X	Casinghead Gas	_ Condensate			- 106	1 14: 11	and Tox	25 7970	
range of operator give name	Sun Explora	ition & Produ	ction Co	., P. O.	Box 186	1, Midi		.83 7770	
DESCRIPTION OF WELL A	ND LEASE				Kind of	Lease	State Le	use No.	
ne Name	Well No	o. Pool Name, includi	_	State, Fe			deral or Fee E-7585		
New Mexico X State		Double A	Abo Lov	er					
cation			, , , , , , , , , , , , , , , , , , ,	1986) F	t From The _	East	Line	
Unit Letter B	:	Feet From TheN	loren - Li	5 6100					
Section 20 Township	17-S	Range 36-E_	, N	мрм, L	ea			County	
	 								
DESIGNATION OF TRANS	SPORTER OF	OIL AND NATU	RAL GAS	ve address to wh	ich annemed	come of this fo	orin is to be se	nt)	
me of Authorized Transporter of Oil									
Texas New Mexico Pipel	ine Co.	or Dry Gas	Address (Gi	Box 1510, we address to wh	ich approved	copy of this fo	orm is to be se	nt)	
ms of Authorized Transporter of Casing	head Gas		Phillin	s Bldg.	Bartlesy	711e - 0	k 7400)4 .	
Phillips Pipeline Co. (well produces oil or liquids,	Unit Sec.	Twp. Rge	is gas actual	ly connected?	When	?			
well produces ou or inquiris,	1	i		سے۔					
his production is commingled with that f	from any other lease	or pool, give comming	gling order nun	nber:		·			
. COMPLETION DATA							Same Res'v	Diff Res'v	
	Oil V	Veil Gas Weil	New Well	Workover	Deepen	Plug Back	25tue wez A	Pili Resv	
Designate Type of Completion		!	Total Depth			P.B.T.D.	<u> </u>		
ate Spudded	Date Compl. Read	ly to Prod.	Ion Depar	<u>.</u>		1			
TO THE CO. III	Name of Producin	e Formation	Top Oil/Ga	Top Oil/Gas Pay			Tubing Depth		
levations (DF, RKB, RT, GR, etc.)	Manie of Floodern	g i ommoon							
erforations	1					Depth Casi	ng Shoe		
						<u>l</u>			
	TUBI	NG, CASING AN	D CEMENT	ING RECOR	<u> </u>	Τ	SACKS CEN	ENT	
HOLE SIZE	CASING & TUBING SIZE		_	DEPTH SET			SACKS CLINEIVI		
						 			
									
	 		_						
. TEST DATA AND REQUE	ST FOR ALL	OWABLE				_			
IL WELL (Test must be after t	recovery of total vo	Iume of load oil and m	ust be equal to	or exceed top al	lowable for th	is depth or be	e for full 24 ha	1673.)	
Date First New Oil Run To Tank	Date of Test		Producing	Method (Fiow, p	ownp, gas lift,	etc.)			
						Choke Siz	<u> </u>		
Length of Test	Tubing Pressure		Casing Pro	Casing Pressure					
			Water - Bi	Water - Bbis.			Gas- MCF		
Actual Prod. During Test	Oil - Bbls.		\" -						
GAS WELL			Dale Con	densate/MMCF		Gravity o	(Condensate		
Actual Prod. Test - MCF/D	Length of Test		Bois. Con	Bois. Collection					
	Tubing Pressure	(Shut-in)	Casing Pr	Casing Pressure (Shut-in)			Choke Size		
Testing Method (pitot, back pr.)	1 HOING Pressure	(Silut-m)				-	٠		
	0.000	ON COL LA NICTO							
VL OPERATOR CERTIFIC	CATE OF CO	JMPLIANCE	 	OIL CO	NSER\				
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above							JUN 1	0 1004	
Division have been complied with an is true and complete to the best of m	y knowledge and be	dief.	D	ate Approv	ved		2011 7	3 130	
) -			210 / ippiot					
(Y)ana Z thin				By Orig. Signed by Paul Kautz					
Signature			_ B)	/		G	eologist		
Maria I. Perez		Accountant Tite	- _	tio.					
Printed Name	. 015=	688-0375	- 11	tle					
4-25-89	フェノニ	<u> </u>	→ 11						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes. 4) Separate Form C-104 must be filed for each pool in multiply completed wells.