

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

API NO. 30-025-30118

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. Operator
Sun Exploration & Production Company

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)
Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)

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
Buffalo Federal

Well No. 1

Pool Name, including Formation
Buffalo Bone Spring

Kind of Lease
State, Federal or Fee Federal

Lease No.
NM32860

Location
Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East

Line of Section 11 Township 19-S Range 33E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Sun Refining & Marketing Co.

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Flaring - under negotiation

Address (Give address to which approved copy of this form is to be sent)
P.O. Box 2039, Tulsa, OK 74102

If well produces oil or liquids, give location of tanks.
Unit B Sec. 11 Twp. 19-S Rge. 33E

Is gas actually connected? No

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. Perez
(Signature)
Accounting Associate
(Title)
4/13/88
(Date)

OIL CONSERVATION DIVISION
Orig. Signed by **APR 21 1988**
APPROVED **Paul Kautz**
BY **Geologist**
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
Date Spudded 10/31/87	Date Compl. Ready to Prod. 1/23/88		Total Depth 13,450		P.B.T.D. 9630'				
Elevations (DF, RKB, RT, CR, etc.) 3729.5 GR	Name of Producing Formation Bone Spring		Top Oil/Gas Pay 9264'		Tubing Depth 9627'				
Perforations 9264-9586						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17 1/2"	13-3/8"		525'		525				
12 1/4"	9-5/8"		5387'		3400				
7-7/8"	5 1/2"		9700'		1075, TOC 6500 T.S.				
	2-7/8" tbq.		9627'						

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 2/8/88		Date of Test 3/27/88	Producing Method (Flow, pump, gas lift, etc.) 2 1/2" x 1 1/2" x 24	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil - Bbls. 12	Water - Bbls. 30	Gas - MCF 22	

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

RECEIVED
 APR 18 1988
 CCD
 HOBBS OFFICE