	DISTRIBUTION	NTAFE NEW MEXICO OIL CONSERVATION C AISSION REDUEST FOR ALLOWABLE REDUEST FOR ALLOWABLE s.g.s. AND AND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				Form C-104 Superseaes Old C-104 and C-17 Elfoctive 1-1-65	
1.	CPERATOR I PROBATION OFFICE	-					
	SUN OIL COMPANY						
	P.O. Box 1861, Midland, TX 79702 Reason(s) for filing (Check proper box) Other (Please explain)						
	New We!l Change in Transporter of: Recompletion Cil Change in Ownership X Casinghead Gas Condensate						
	If change of ownership give name SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704						
П.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.						
	S. E. Cone	1 Tubb-Gas		State, Føderal	or Fee Fee		
	Unit Letter;198	reet rom the Cin	• and1980	Fest From T	East		
	Line of Section 26 Tow	nship 21 Range	37 , ммрм	·	Lea	County	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil or Condensate Address (Give address to which approved copy of this form is to be sent)						
	None	Address (Give address)	to which approv	ed copy of this form i.	s to be sent)		
	Name of Authorized Transporter of Cas El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) Jal, NM					
	If well produces oil or liquids,	Is gas actually connected? When					
	give location of tanks.		Yes	l			
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Cil Well Gas Well New Well Workover Deepen Rug Rock Same Region Diff. Regioner						
	Designate Type of Completio		New Well Workover	Deepen	Plug Back Same R	es'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
	Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
	Perforations	Depth Casing Shoe					
-	TUBING, CASING, AND CEMENTING RECORD						
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
		· · · · · · · · · · · · · · · · · · ·	1				
					·····		
٧.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to ar exceed top allow						
	DIL 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.)						
	Lengin of Test	Tubing Preasure	Casing Pressure	· · · ·	Choke Size		
	Actual Prod. During Test	Cil-Sbis.	Water-Bbla.		Gas • MCF	· · · · · · · · · · · · · · · · · · ·	
	GAS WELL						
	Actual Prod. Test-MCF/D	Prod. Teet-MCF/D Length of Test		Bbis. Condensate/MMCF		Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressurs (Shut-in)	Casing Pressure (Shut	-12)	Choke Size	······	
	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION				
	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.						
	ind complete to the best of my knowledge and belief.		BY Originates by Jerry Sextern TITLE Dist 1. Grave				
			E-				
	Surfrage (Signature)		This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or deepened				
•	Production/Proration	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
	(Title) July 1, 1981		All sections of this form must be filled out completely for allow- able on new and recompleted wells.				
	(Date)		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 Constant. Forme C-104 must be filed for each soal in multiply				
			and an State of the State of th				