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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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
Effective 1-1-65

Operator Sun Oil Company	
Address P. O. Box 1861, Midland, TX 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐
Update well records	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE				
Lease Name D. Hardy	Well No. 3	Pool Name, including Formation Blinebry (Oil)	Kind of Lease State, Federal or Fee	Fee
Location				
Unit Letter H	2310	Feet From The North	Line and 330	Feet From The East
Line of Section 29	Township 21-S	Range 37-E	N.M.P.M.	Lea

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil ☒ or Condensate ☐		Address (Give address to which approved copy of this form is to be sent)		
Western Oil Transporting Co., Inc.		P. O. Box 725, Hobbs NM 88240		
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐		Address (Give address to which approved copy of this form is to be sent)		
Getty Oil Co.		P. O. Box 3000, Tulsa, OK 74102		
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 29	Twp. 21	Rge. 37
			Is gas actually connected?	When
			Yes	4-26-78

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

V. COMPLETION DATA				
Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☐	Workover ☐
	Deepen ☐	Plug Back ☐	Same Reservoir ☐	Entire Reservoir ☐
Date Spudded 10-23-49	Date Compl. Ready to Prod. 4-7-78	Total Depth 7872	P.B.T.D. 6050	
Elevations (DF, RKB, RT, GR, etc.) 3472 GR	Name of Producing Formation Blinebry (Oil)	Top Oil/Gas Pay 5578	Tubing Depth 6001.61	
Perforations 5536-6065			Depth Casing Shoe 7871	

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/4	13 3/8	317	300
12 1/4	9 5/8	2848	1000
8 3/4	5 1/2	7871	500
8 3/4	2 3/8	6002	Tubing

VI. 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 4-7-78	Date of Test 4-13-78	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size 2"
Actual Prod. During Test	Oil-Bbls. 29	Water-Bbls. 1	Gas-MCF 253

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Brbl. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

A. 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.		JAN 19 1979	
Production Staff Associate		APPROVED _____, 19	
1-18-79		BY _____	
		Orig. Signed by Jerry Sexton	
		TITLE _____	
		Dist. L. Supv.	
		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 deviate tests taken on the well in accordance with RULE 111.	
		All sections of this form must be filled out completely for all wells on new and re-completed wells.	
		Fill out only Sections I, II, III, and VI for change of well name or number, or transporter, or other such change of condition.	