L		l	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF			

## NEW MEXICO OIL CONSERVATION COMI. SION REQUEST FOR ALLOWABLE

Form C-104

I.	FILE U.S.G.S.  LAND OFFICE  IRANSPORTER  OIL  GAS  OPERATOR  PRORATION OFFICE	4	AND ANSPORT OIL AND NATU	Supersedes Old C-104 and C-1 Effective 1-1-65  IRAL GAS	
	Sun Exploration & Production Co.				
	P.O. Box 1861, Midland Reason(s) for filing (Check proper box New Well Recompletion	Change in Transporter of: OII Dry G	Other (Please expla	,	
	If change of ownership give name and address of previous owner	Casinghead Gas Conde	PLAREU AU UNIDES A	N BROUPTION TO R-1010	
II.	DESCRIPTION OF WELL AND LEASE			E.W.	
	State "A" A/C 2  Cocation  Well No. Fool Name, Including Formation  Fool Name, Including Formation  State "A" A/C 2  Fool Name, Including Formation  State, Federal or Fee State  South				
	Unit Letter P :1295	Feet From The South Li		t From The <u>Fast</u>	
		waship 22-S Range 36		<u>ea</u> County	
111.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Texas New Mexico Pipel Name of Authorized Transporter of Car Phillips Petroleum Com	<del></del>	P. O. Box 1510 M Address (Give address to which 4001 Penbrook Od	idland TX 7970] h approved copy of this form is to be sent)	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected?	When 1/2/83	
IV.	If this production is commingled with COMPLETION DATA  Designate Type of Completic	Oil Well Gas Well		er:  Plug Back   Same Res'v.   Diff. Res'v.	
	Date Spudded 8/25/83 Elevations (DF, RKB, RT, GR, etc.,	Date Compl. Ready to Prod.	Total Depth	P.B.T.D. 3895	
	3560.6 GR	Name of Producing Formation Queen	Top OII/Gas Pay 3730	Tubing Depth  3844 Depth Casing Shoe	
	3873-3889, 3826-3864, 3			Depili dasing Shoe	
	HOLE SIZE	TUBING, CASING, AN	D CEMENTING RECORD  DEPTH SET	SACKS CEMENT	
	12-1/4	8-5/8	573	375 Sxs	
	7-7/8	5-1/2	3900	950 Sxs	
У.	TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Bun To Tanks	OR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours)	oad oil and must be equal to or exceed top allow-	
	10/14/83	11/1/83	Producing Method (Flow, pump		
	Length of Test 24 hrs	Tubing Pressure	Pumping 14"		
	Actual Proa, During Test	12	Water-Bbis.	Gas-MCF - 25	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI. CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Commission have been complied with and that the is above is true and complete to the best of my knowledge.		egulations of the Oil Conservation ith and that the information given best of my knowledge and belief.	APPROVED NOV ORIGINAL SECURIT  BY DISTRICT  TITLE  This form is to be fill If this is a request form	ed in compliance with RULE 1104. r allowable for a newly drilled or despened	
Senior Accounting Assistant (Title) 11/14/83 (Date)			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.  Secretal Forms Colod must be filled for each pool in multiply		

INCLINATION REPORT						
OFERATOR SUN Expl			, MIDLAND, TEXAS 79702			
LEASE NAME STATE	EA AIC 2	WELL NO. 70 FIEL	DEUDICE Schenkings Queen-touth			
LOCATION LEA COL	UNTY, NEW MEXICO					
<b>DEPTH</b>	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED			
572 1068 1556 2037 2534 3033 3313 3813 3900	3/4 3/4 1 \frac{1}{4} 1 \frac{1}{2} 1 \frac{1}{2} 1 \frac{1}{4} 1 \frac{1}{4} 1 \frac{1}{4} 1 \frac{1}{2} 1 \frac{1}{2} 1 \frac{1}{2}	7.4932 6.4976 10.6384 12.6022 13.0214 10.8782 6.1040 13.1000 2.2794	7.4932 13.9908 24.6292 37.2314 50.2528 61.1310 67.2350 80.3350 82.6144			
I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.						
		CACTUS DE	RILLING COMPANY			
		in in the	ac Clack			
•		TITLE DEBBIE	CLARK, OFFICE MANAGER			
AFF IDAVIT:						
Before me. the un	ndersigned authority, appe	ared DEBBIE				
known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.  AFFIANT'S SIGNATURE						
Sworn and subscr	ibed to in my presence on	this the IST day	ofSEPTEMBER, 1983			
SEAL NOTARY BON	GARLIN R. TAYLOR NOTARY PUBLIC-NEW MEXICO D FILED WITH SECRETARY OF STATE SION EXPIRES FEBRUARY 6, 1984	Notary Publ:	ic in and for the County te of New Mexico			