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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-101
Supersedes Old C-101 and C-102
Effective 1-1-65

Operator
Sun Oil Company
Address
P. O. Box 1861, Midland, TX 79702
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☒ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐ Other (Please explain)
Rule 303-C
Downhole Commingle

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE
Lease Name
State Land "15"
Well No.
1
Pool Name, including Formation
Blinebry
Kind of Lease
State, Federal or Fee State
Location
Unit Letter
M
Feet From The
660
South
Line and
660
Feet From The
West
Line of Section
16
Township
21-S
Range
37-E
NMPM
Lea

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Tex-New Mex Pipeline Co.
Address (Give address to which approved copy of this form is to be sent)
Broadmoor Building, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Skelly Oil Co.
Address (Give address to which approved copy of this form is to be sent)
Box 1650, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.
Unit
M
Sec.
16
Twp.
21-S
Rge.
37-E
Is gas actually connected?
Yes
When
Unknown
If this production is commingled with that from any other lease or pool, give commingling order number: with this application

COMPLETION DATA
Designate Type of Completion - (X)
Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☒ Seal ☐ Test ☒
Date Spudded
7-29-78
Date Compl. Ready to Prod.
8-25-78
Total Depth
6700
P.B.T.D.
6699
Elevations (DF, RKB, RT, CR, etc.)
3466 DF
Name of Producing Formation
Blinebry
Top Oil/Gas Pay
5639
Tubing Depth
665
Perforations
5648-5698
Depth Casing Shoe

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17	13 3/8	334	350
12	9 5/8	2849	2100
8 3/4	7	6699	500

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or greater than that obtained for this depth or be for full 24 hours)
Date First New Oil Run To Tanks
9-21-78
Date of Test
9-27-78
Producing Method (Flow, pump, gas lift, etc.)
Pump
Length of Test
24 hrs
Tubing Pressure
-
Casing Pressure
-
Choke Size
None
Actual Prod. During Test
Oil - Bbls.
11
Water - Bbls.
58
Gas - MCF
58.6

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

CERTIFICATE OF COMPLIANCE
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.
C. M. Munger
(Signature)
Production Staff Associate
12-18-78
(Date)

OIL CONSERVATION COMMISSION
APPROVED
DEC 26 1978
BY
Orig. Signed by
Les Clemente
TITLE
Oil & Gas Eng.
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 test results taken on the well in accordance with RULE 1101.
All sections of this form must be filled out completely on each file 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.