J. 06 CO.122	 .	1	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
THANSFORTER	GAS		
OPERATOR			
PRORATION OF			

NEW MEXICO OIL CONSERVATION COMMIS. IN

Form C-104

	FILE	4	REQUES	FOR ALLO	WABLE	Supersedes 0: Effective 1-1-	ld C-104 and C-11	
	U.S.G.S.	AUTHOR	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				Friectiae 1-1-02	
	LAND OFFICE	AUTHORIZATION TO TRANSPORT UIL AND NATURAL GAS				_ GAS		
	TRANSPORTER GAS	1						
	OPERATOR]						
1.	PRORATION OFFICE Operator					 		
	Sun 011 Company Address							
	P. O. Box 1861, Midland, Texas 79701							
	Reason(s) for filing (Check proper box)			Ott	Other (Please explain)			
	New Well Recompletion	Change in T	Transporter of: Dry (as 🗆				
	Change in Ownership	Casinghead	₩	ensate				
	If change of ownership give name and address of previous owner					T		
II.	DESCRIPTION OF WELL AND	LEASE						
	State Land "15"	Well No. P	Pool Name, Including Drinkard	Formation	Kind of Le State, Fed	eral or Fee State	Lease No.	
	Location Unit Letter P 66	iO Feet From	The East L	ine and 6	60 Feet Fro	om The South		
	Line of Section 16 Tov	wnship 21-S	Range	37-E	, NMPM,	Lea	County	
TTY	DESIGNATION OF TRANSPORT	TED OF OIL A	ND NATURAL C	AC		VE JANUARY 31, 19 OIL COMPANY ME	-	
111.	Name of Authorized Transporter of Oil	or Con	densate	Address (Giv	e address TNTO G	eter oll compan		
	Texas-New Mexic Pipe	•			-	d, Texas 79701		
	Name of Authorized Transporter of Cas Skelly 011 Company			P.O. Box	1650, Tulsa,	Oklahoma 74102		
	If well produces oil or liquids, give location of tanks.	Unit Sec. 0 16	Twp. Rge. 21-S 37-E	Yes		When 2-15-75		
IV.	If this production is commingled with COMPLETION DATA		other lease or pool		Workover Deepen		stv. Diff. Restv.	
	Designate Type of Completic		Well Gds Well	1 146 M METT	Workover Deepen	Flug Back Same Ne	sv. Diff. Res.v.	
	Date Spudded	Date Compl. Red	ady to Prod.	Total Depth		P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Product	ing Formation	Top Oil/Gas	Рау	Tubing Depth		
	Perforations				· · · · · · · · · · · · · · · · · · ·	Depth Casing Shoe		
		TU	BING, CASING, AN	ID CEMENTIN	G RECORD			
	HOLE SIZE		TUBING SIZE		EPTH SET	SACKS CE	MENT	
								
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 allow-							
	OIL 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.)							
	Length of Test	Tubing Pressure		Casing Pressure		Choke Size		
	Actual Prod. During Test	Oil-Bbls.		Water-Bbis.		Gas-MCF		
	Actual Prod. During 1981	U11 - D2181						
	Actual Prod. Test-MCF/D	Length of Test		Bbls. Conden	sate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure	(Shut-in)	Casing Press	ure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION		/ATION COMMISSIO			
•••	hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given				7			
			APPROVED			<u>Caistain</u> , 19		
above is true and complete to the best of my knowledge		e information given owledge and belief.	BY		Cald. C			
				T.T. 5		\$ 1 L		
		1						
	(1 1 X 8			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened				
	Proration Analyst			well, this form must be accompanied by a tabulation of the deviation				
				All se	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-			
	Manch 24 1075	le)	;)		able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner,			
	March 24, 1975	te)		well name	or number, or transp	II, III, and VI for changering or other such changes he filed for each o	ge of condition.	
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