	(Tirle) 		able on new and recompleted we Fill out only Sections I. Il well name or number, or transport	at be filled out completely for allow- bla. I, III, and VI for changes of owner, er, or other such change of condition.
	Proration Analyst		BY TITLE 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 deviation tests taken on the well in accordance with RULE 111.	
	commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.			
	I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION COMMISSION	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size
	GAS WELL Actual Prod. Test-MCF/D	Longth of Teet	Bbls. Condensate/MMCF	Gravity of Condensate
	GAS WELL	1.32 A.U.	· · · · · · · · · · · · · · · · · · ·	
	Actual Prod. During Test 13.0 011	011-Bble. 13.0	Water-Bbls.	Gae-MCF 206
	Length of Test <u>24 hours</u> Actual Prod. During Test	35#	Casing Pressure 40#	Choke Size
	12-9-76	12-9-76 Tubing Pressure	Pump w/1½" Insert	· · · · · · · · · · · · · · · · · · ·
V.	TEST DATA AND REQUEST F(OIL WELL Date First New Oil Run To Tanks		fter recovery of total volume of load oil spih or be for full 24 hours) Producing Method (Flow, pump, gas li	and must be equal to or exceed top allow ft. etc.)
	12¼" 8-5/8"	<u>9-5/8"</u> 7"	2863.28' 6648.76'	1000
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			CEMENTING RECORD	6642
	Perforations 5687-58741		1	Depth Casing Shoe
	Elevations (DF, RKB, RT, GR, etc.) DF 3519 ¹	Name of Producing Formation Blinebry	Top Oil/Gas Pay 5678'	Tubing Depth 6169'
	Date Spudded 11-4-76	Date Compl. Reedy to Prod.	Total Depth 6679'	P.B.T.D. 6560'
	Designate Type of Completio	$pn = (X)$ χ	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v. X X
	If this production is commingled with COMPLETION DATA	th that from any other lease or pool,		
	If well produces oil or liquids, give location of tanks,	E 20 21S 37E	Yes	
	Skelly Oil Company	Unit Sec. Twp. Rge.	P. 0. Box 1166, Eunice Is gas actually connected?	N.M. 88231
	Texas-New Mexico Pipe	Line Co.	P. O. Box 1510, Midland Address (Give address to which appro	1. TX 79701
XIX.	DESIGNATION OF TRANSPOR'			OIL COMPANY MERGED
	Line of Section 20 Ton	within 215 Range	37Е , NMPM, Lea	IVE JANUARY 31, 1977, County
		980 Feet From The N_Lir	ne and660Feet From	The W
	J. G. Randle	1 Blinebry Oil		Lease No.
IJ.	DESCRIPTION OF WELL AND	LEASF. Well No. Pool Name, Including F	ormation Kind of Leas	
	if change of ownership give name and address of previous owner			
	New Well Recompletion X Change in Ownership	Change In Transporter of: OII Dry Go Casinghead Gas Conde	\equiv	
	Address P. O. Box 1861, Midla Reason(s) for filing (Check proper box	nd, TX 79701	Other (Please explain)	
	Cperator SUN OIL COMPANY			
1	OPERATOR PRORATION OFFICE			
	IRANSPORTER OIL GAS	4		
	U.S.G.S.	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL	
	SANTA FE	REQUEST FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65
	DISTRIBUTION	NEW MEXICO OU		

RECEIVED TE 87 1976 OIL CONSERVATION COMM. HOBBS. N. M.