

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION 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-110
Effective 1-1-65

Operator SUN OIL COMPANY	
Address P. O. Box 1861, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name W. W. Weatherly	Well No. 6	Pool Name, Including Formation Penrose Skelly Grayburg	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter K ; 2310 Feet From The South Line and 2310 Feet From The West				
Line of Section 17 Township 21-S Range 37-E , NMPM, Lea County				

EFFECTIVE JANUARY 31, 1977,
SKELLY OIL COMPANY MERGED
INTO SKELLY OIL COMPANY.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipe Line Corp.	Address (Give address to which approved copy of this form is to be sent) Box 2648, Houston, Texas 77001			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Skelly Oil Company	Address (Give address to which approved copy of this form is to be sent) Box 1650, Tulsa, Oklahoma 74102			
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 17	Twp. 21S	Rge. 37E
Is gas actually connected?		When		
Yes		Dec. 1954		

If this production is commingled with that from any other lease or pool, give commingling order number: PC-411

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-29-72	Date Compl. Ready to Prod. 7-16-72		Total Depth 3840		P.B.T.D. 3807			
Elevations (DF, RKB, RT, GR, etc.) RKB 3480 GR 3470.2	Name of Producing Formation Grayburg		Top Oil/Gas Pay 3661		Tubing Depth 3772			
Perforations 3698-3766					Depth Casing Shoe 3840			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		1255'		395			
7-7/8"	5-1/2"		3840'		330			
	2-7/8"		3722					

V. 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 exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 7-18-72	Date of Test 8-16-72	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hrs.	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test	Oil-Bbls. 39.0	Water-Bbls. 42	Gas-MCF 244.3

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 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.

Charles Gray Charles Gray
(Signature)
Proration Clerk
(Title)
August 18, 1972
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 25 1972, 19
BY [Signature]
TITLE SUPERVISOR DISTRICT I

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.

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

RECEIVED

AUG 21 1972

OIL CONSERVATION COMM.
HOBBS, N. M.