	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR PRORATION OFFICE	REQUEST	ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AS	
	Operator SUN TEXAS COMPANY				
ŀ	Address				
	P.O. Box 4067 Midland, Texas 79704 Recoon(s) for filing (Check proper box) Other (Please explain) New We!! Change in Transporter of: Recompletion Oil Dry Gas Change in Ownership X				
1	I change of ownership give name and address of previous owner	TEXAS PACIFIC OIL COMPA	NY, INC. P. O. Box 406	7 <u>Midland, TX, 79704</u>	
II. 1	DESCRIPTION OF WELL AND I	Well No. Pool, Name, Including Fo		1 1	
	STATE A AlG-1	M. SUSTIN FUT	1ATTIX I'RURS State, Federal	or Fee STATE.	
	Unit Letter <u>B</u> ; <u>660</u> Feet From The <u>MCPTH</u> Line and <u>1980</u> Feet From The <u>EPST</u>				
	Line of Section 14 Township 2305 Range 36 8 , NMPM, 1819 County				
ļ					
n. - (DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate			ed copy of this form is to be sent)	
	TEXAS Men Marine Pre-LINE		Address (Give address to which approved copy of this form is to be sent)		
ĺ	PULLING PARCE GAS		JAL, NEW NEXICO BCI (A.C. DOSA IX. Is gas actually connected? When		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	18 gas actually connected?	4-12-60	
	If this production is commingled wit	h that from any other lease or pool, (give commingling order number:	•	
v .	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
			Top Oil/Gas Pay	Tubing Depth	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			
	Perforations				Depth Casing Shoe
		TUBING, CASING, AND	1	SACKS CEMENT	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	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- able for this depth or be for full 24 hours)				
	OIL, WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	't, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	- Oil-Bbls.	Water - Bbis.	Gas-MCF	
	Actual Float Dening Float				
	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)	Cosing Pressure (Shut-in)	Chcke Size	
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
	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.		APPROVED OCT 27 1980		
			BYJerry Sector		
			TITLE Dist 1 Supe		
	- C. Engler		11	compliance with RULE 1104. vable for a newly drilled or deepened	
	10.000		well, this form must be accompa-	dence with RULE 111.	
	Regional Operations Superintendent/West		All sections of this form must be filled out completely for allow- able 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		
	(Date)				

RECEIVED OCT 7.1980 OIL CAMPLE BY ATLON DIV