Abrait 5 Copies Appropriate District Office DISTRICT I .O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Revised 1-1-89

DISTRICT II ?.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API Na Operator 30-025-25137 Oryx Energy Company Address O. Box 1861, Midland, Texas 79702 Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of: New Well Dry Gas Oil Recompletion Casinghead Gas Condensate 図 Change in Operator Texas 79702 Sun Exploration & Production Co., P. O. Box 1861, Midland, If change of operator give name and address of previous operator Federal IL DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease Well No. Pool Name, Including Formation Lease Name State, Federal or Fee NM032369 Elliott B 12 South Brunson Drinkard-Abo Location Feet From The North Line and 467 Feet From The West Unit Letter ___D_ Range 37-E , NMPM, Lea Section 12 Township 22-S III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate Texas New Mexico Pipeline P. O. Box 1510, Midland. Address (Give address to which approved copy of this form is to be sent) Ä or Dry Gas Name of Authorized Transporter of Casinghead Gas P. O. Box 3109, Midland, Texas Texaco Producing Inc When? Is gas actually connected? Rge. If well produces oil or liquids, Unit Sec. Twp. give location of tanks. i D 12 | 22S | 37E BAC- 598 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Deepen Plug Back Same Res'v Diff Res'v Oil Well Gas Well New Well Workover Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 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 allowable for this depth or be for full 24 hours.) OIL WELL Producing Method (Fiow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test Choke Size Casing Pressure Length of Test **Tubing Pressure** Gas- MCF Water - Rhis Actual Prod. During Test Oil - Bbls. GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test - MCF/D Length of Test Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) VL OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation JUN 1 9 1989

Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Accountant <u>Maria I</u> Perez Printed Name 915-688-0375 4-25-89

Date Approved ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR By __

Title_

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.