	and the second and the second	1			
	DISTRIBUTION	NEW MEXICO OIL	CON		
	ANTA FE	REQUEST			
	FILE	11233			
	J.S.G.S.	AUTHORIZATION TO TR	ANS		
	LAND OFFICE	 -			
	TRANSPORTER OIL GAS				
	OPERATOR				
1.	PRORATION OFFICE				
	Sun Exploration & Production Co.				
Address P. O. Box 1861, Midland, Texas 79702					
)				
	New Weil	Change in Transporter of:			
	Recompletion	Oil Dry G	as.		
	Change in Ownership	Casinghead Gas Conde	en s at		
	If change of ownership give name and address of previous owner				
IJ.	DESCRIPTION OF WELL AND	LEASE			
		Well No. Pool Name, Including F	ormo		
	Elliott B 12	2 Drinkard			
	Unit Letter D;	Feet From The North Li	ne ar		
	Line of Section 12 Tox	waship 22-S Range	37-		
II.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL G	10		
	Name of Authorized Transporter of Oil	or Condensate	Ac		
	Texas New Mexico Pip	peline			
	Name of Authorized Transporter of Cas	singhead Gas X or Dry Gas	Ad		
	Getty				
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. D 12 22S 37E	Is		
v	If this production is commingled wit COMPLETION DATA	· · · · · · · · · · · · · · · · · · ·			
	Designate Type of Completion - (X)				
	Date Spudded		 _		
	Date Spudded .	Date Compl. Ready to Prod.	То		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	То		
	Perforations		<u> </u>		
-					
-		TUBING, CASING, AND	CE		
-	HOLE SIZE	CASING & TUBING SIZE	-		
ŀ			+		
}			┼		
-			-		
7. '	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	 **		
	OIL WELL	able for this de			
	Date First New Oil Run To Tanks	Date of Test	Pro		
L					
	Length of Test	Tubing Pressure	Cai		
_					
	Actual Prod. During Test	Oil - Bbls.	Wat		
·-	GAS WELL		1		
ſ	Actual Prod. Test-MCF/D	Length of Test	Вы		
			301		
-	Testing Method (pitot, back pr.,	Tubing Pressure (Shut-in)	Cas		

(Date)

ISERVATION COM: JON

Form C-104

FILE	REQUEST	T FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-65		
J.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA		-		
LAND OFFICE		WHO SKY OLE AND MATURAL	. GAS		
TRANSPORTER GAS	 				
OPERATOR					
1. PRORATION OFFICE Operator					
Sun Exploration & Production Co.					
P. O. Box 1861, Midland, Texas 79702					
Reason(s) for filing (Check prope	Reason(s) for filing (Check proper box) New Well Change of Transport Trans				
Recompletion	Change in Transporter of: Oil Dry C	Name Chang			
Change in Ownership	Casinghead Gas Cond	ensate From: Sun	Oil Company		
If change of ownership give nat and address of previous owner	ne				
II. DESCRIPTION OF WELL A	ND LEASE Well No. Pool Name, Including	Formation Kind of Lec			
Elliott B 12	2 Drinkard	State, Fede	Ledge 170.		
Location Init Letter D	567 North	1.67			
Unit Letter ;;	567 Feet From The North	ine and 467 Feet From	n The WEst		
Line of Section 12	Township 22-S Range	37-Е , _{NMPM} , Lea	County		
I DESIGNATION OF TRANSP	OPTED OF OH AND NAMEDAY O				
Name of Authorized Transporter of	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent)				
Texas New Mexico		Box 1510, Midland,	Texas		
Name of Authorized Transporter o Getty	f Casingheaa Gas X or Dry Gas	1	oved copy of this form is to be sent)		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Box 1650, Mulsa, OK is gas actually connected?	Then		
give location of tanks.	D 12 22S 37E	Yes	8-20-76		
If this production is commingled. COMPLETION DATA	with that from any other lease or pool,				
Designate Type of Compl		New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top C!I/Gas Pay			
, and the second	reality of the state of the sta	Top On/Gds Pdy	Tubing Depth		
Perforations			Depth Casing Shoe		
Tirring CASING AND		D CENTURE DECEM			
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT		
			OACKS CEMEN!		
	EST 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)				
OII, WELL Date First New Oil Run To Tanks	OII. WELL able for this depth or be for full 24 hours)				
		Trouble in the state of the sta	•,•, •,		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil-Bbls.	Water - Bols.	Gds-MCF		
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Tanka kaka dalah sahar					
Testing Method (pitot, back pr.,	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
. CERTIFICATE OF COMPLIA	ANCE	OIL CONSERVA	ATION COMMISSION		
		11			
Commission have been complie	nd regulations of the Oil Conservation d with and that the information given	APPROVED Orig. Signe	, 19		
above is true and complete to	the best of my knowledge and belief.	BY Jerry Sext)H		
\ \ \		TITLE Dist 1 Su			
	•		compliance with put F 1104		
_ Lattom Lim	P	If this is a request for allow	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
Acct. Asst. II	ghature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	(Title)		ast be filled out completely for allow-		
1-1-82		able on new and recompleted we	Film.		

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.