1. or co.,		i	
DISTRIBUTION			l
SANTA FE		1	
FILE			
U.S.G.S.		1	
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

VI.

1.	GANTA FE FILE J.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE	REQUES	CONSERVATION COMMISSION T FOR ALLOWABLE AND RANSPORT OIL AND NATUR	Effective 1-1	Old C-104 and C-1 -65		
	Sun Oil Company						
	P.O. Box 1861, Midland, Texas 79702						
	Reason(s) for filing (Check proper be New Well	Change in Transporter of:	Other (Please explain)				
	Recompletion Change in Ownership	OII Dry C	🗝 📙 Walter Lynch	k well number cham m #5	nge from		
	If change of ownership give name and address of previous owner	Casinghead Gas Cond	en s ate				
11.	DESCRIPTION OF WELL AND	LEASE					
	Lynch-Christmas Com.	Well No. Pool Name, Including 5 Tubb Zone		Lease ederal or Fee Fee	Lease No. 936209		
	Location Unit Letter M	330 Feet From The South Li	ine and 330	Mant	A & B		
				rom The West			
	Line of Section To	ownship 22S Range	37Е , ммрм,	Lea	County		
III.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL G	AS Address (Give address to which a				
	The Permian Corp.		P.O. Box 1183, Hou	ston, Texas 7700	01		
Name of Authorized Transporter of Casing El Paso Natural Gas Co.		_ _	Address (Give address to which a	pproved copy of this form is	to be sent)		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Jal, NM 88252 Is gas actually connected?	When			
	give location of tanks.		Yes	12-28-81			
IV.	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA						
	Designate Type of Completi	on - (X) Oll Well Gas Well	New Well Workover Deeper	Plug Back Same Re	s'v. Diff. Res'v.		
	Date Spudded 6-13-77	Date Compl. Ready to Prod.	Total Depth 7897	P.B.T.D. 7884'			
	Elevations (DF, RKB, RT, GR, etc.) 3350.3GR	Name of Producing Formation Tubb	Top Oil/Gas Pay 5937'	Tubing Depth			
	Perforations	1400	3937	Depth Casing Shoe			
	6006-6140	TUBING CASING AN	TUBING, CASING, AND CEMENTING RECORD				
Ì	HOLE SIZE 12 1/4	CASING & TUBING SIZE	DEPTH SET	SACKS CEI			
ļ	7 7/8	8 5/8 5 1/2	1175' 7897'	350 SX			
		0.172	7037	1230 37	73		
v .	TEST DATA AND REQUEST F	OR ALLOWARIE (Tare muse has					
	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) Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)						
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	Choke Size		
-	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF			
			114.5. 2 2 2 3	Gus-MCF			
	GAS WELL						
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
-	654 Testing Method (pitot, back pr.)	24 Hr Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	<u>Flowing</u>		410	32/64			
¥1. (CERTIFICATE OF COMPLIAN	CE		VATION COMMISSIO			
1	hereby certify that the rules and	regulations of the Oil Conservation	APPROVED				
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Orig. Signed by Les Clameres				
			TITLE	enter, S			
	Da Ama Vach		This form is to be filed in compliance with RULE 1104.				
(Signature) Acct. Asst. II (Title) 1-8-82			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 allow-				
							able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner,
				(Da	ite)	well name or number, or transp	porter, or other such chang