AND       AND       Ethentwee         J.S.G.S.       AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS         LAND OFFICE       OPERATOR       OPERATOR         1. PROBATION OFFICE       OPERATOR       OPERATOR         1. PROBATION OFFICE       OPERATOR       Other /Please explain         1. OPERATOR       OPERATOR       Other /Please explain         1. OPERATOR       Other /Please explain       Other /Please explain         Address       P.O. BOX 1861, Midland, TX 79702       Other /Please explain         Restoring for hing (Check proper box)       New Well       Obage in Transporter of: Other Ordersate       Other /Please explain         New Well       Change in Ownership give name       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704       III         In dedress of previous owner       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704       III DESCRIPTION OF WELL AND LEASE         Lease Name       Main Nai, Pon, Nature, Inclusing Pormation       Kind of Lease       East         Unit Letter       I       1650       Peet From The South       Box 2648       East         Line of Section       21       Townsite       23-S       Range       Address for which approved copy of this for         Nature of Authorized Transporter of Casinghards       Mattere Affore address to which approved copy of thi	Lease No. NM 2A	
Interact       RESIDENT FOR ALLS AND       AND         I.s.d.s.       AUTHORIZATION TO TRANSPORT OLL AND NATURAL GAS         IRANDOFFICE       I         IRANDOFFICE       I         IRANDOFFICE       I         IRANSPORTER       OIL         <	Lease No. NM 2A	
J.S.G.S.       AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS         I. AND OFFICE       OIL         I. PRORATION OFFICE       OIL         I. PRORATION OFFICE       OIL         OPERATOR       OIL         I. PRORATION OFFICE       Other IPlease capital         OPERATOR       Other IPlease capital         OPERATOR       Other IPlease capital         OPERATOR       Other IPlease capital         OPERATOR       Other IPlease capital         New Weil       Change in Transporter of:         Recompletion       Oil         II Change of ownership give name       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II DESCRIPTION OF WELL AND LEASE       Condensate         Lecetton       III OF Provide of the Provid	Lease No. NM 2A County	
LAND OFFICE IRANSPORTER OF ULL IGA3 OPERATOR OFFICE IRANSPORTER OFENTOR OFENTOR OFENTOR OFENTOR SUN OIL COMPANY Address P.O. Box 1861, Midland, TX 79702 Reasons) for thing (Care proper box) New Well Change in Concerning Casingheeri Cas Condensate Other (Please explain) New Well Change of ownership give name SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704 In DESCRIPTION OF WELL AND LEASE Less Name State "A" A/C-1 114 Jalmat Tansill Yates 7-Rivers Suste, Federal of Fee State Location Unit Letter_I	NM 2A County	
Image: Program (as)         Image: Program (as)         Operation         SUN OIL COMPANY         Address         P.O. Box 1861, Midland, TX 79702         Reasons) for thing (Chreck proper box)         New Weil       Change in Transporter of:         Performed (Chreck proper box)         New Weil       Change in Transporter of:         Performed (Chreck proper box)         New Weil       Casinchead Gas         Condensate       Condensate         If change of ownership give name sun TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         ID DESCRIPTION OF WELL AND LEASE.         Lease Name       Fail Not Foot Date, Including Formation         State "A" A/C-1       114         Jall mat Tansill Yates 7-Rivers         State "A" A/C-1       114         Jall mat Tansill Yates 7-Rivers         State:       Isome of Authorited Transporter of Cill (as of Condensate (as Section 2)         Nume of Authorited Transporter of Cill (as of Condensate (as Converse)       Address (Gue address to which approved copy of this formation Shell Pipeline Corporation         Name of Authorited Transporter of Cill (as of Condensate (as Converse)       Address (Gue address to which approved copy of this formation Shell Pipeline Corporation         Name of Authorited Transporter of Classingacid Cas (as (as Converse) (as (as (as (as (a	NM 2A County	
OPERATOR         1.       OPERATION OFFICE         Certator         SUN OIL COMPANY         Address         P.O. Box 1861, Midland, TX 79702         Reason(s) for thing (Check proper box)         New Weil       Change in Transporter of:         Recompletion       Oil       Cry Ora         Change in Ownership give name       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II.       DESCRIPTION OF WELL AND LEASE         Lease Name       New Weil         State "A" A/C-1       114         Jalmat Tansill Yates 7-Rivers State, Federal of Fee State         Lecation       Unit Letter         Unit Letter       I         Towmanip       23-S         Pange       36-E         Network of Authorized Transporter of Oil AND NATURAL GAS         Neme of Authorized Transporter of Oil AND NATURAL GAS         Neme of Authorized Transporter of Condenastie         Neme of Authorized Transporter of Condenastie         Neme of Authorized Transporter of Condenastie         Matters (Gue address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Neme of Authorized Transporter of Considered Gas (Condenastie)       Address (Gue address to which approved copy of this form	NM 2A County	
Coperator         SUN OIL COMPANY         Address         P.O. Box 1861, Midland, TX 79702         Reason(s) for filing (Check proper box)         New Weil       Change in Transporter of:         Recompletion       Cil         Change in Concersing)       Condensate         If change of ownership give name       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         and address of previous owner       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II. DESCRIPTION OF WELL AND LEASE.       Lease Name         Lease Name       Vel. No. Pool link, including Formation         State "A" A/C-1       114         Jalmat Tansill Yates 7-Rivers       State, Federal or Fee State         Location       Unit Letter       I         Unit Letter       I       1650         East       State Section       21         Townsnip       23-S       Banne         Banne       36-E       NMPM,         Leas       Nome of Authoristed Transporter of Casingheed Gas (2, or Dordensatic)       Address (Give address to which approved copy of this for         Shell Pipeline Corporation       Rease (Give address to which approved copy of this for       State for address (Give address to which approved copy of this for         Name of Authoristed Transporter of Casin	NM 2A County	
SUN OIL COMPANY         Address         P.O. Box 1861, Midland, TX 79702         Reason(s) for tiling (Chreak proper box)         New Well       Change in Transporter of:         Recompletion       Oil         Change in Ownership give name       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II Change of ownership give name       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II DESCRIPTION OF WELL AND LEASE.       Lease Name         Lease Name       Kind of Lease         State "A" A/C-1       114         Jalmat Tansill Yates 7-Rivers         State "A" A/C-1       114         Lease Name       South         Unit Letter       I         J 1650       Feet From The South         Unit Letter       I         J Township       23-S         Range       Address (Give address to which approved copy of this for         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casingened Gas (or Dry Gas)       Address folice address to which approved copy of this for         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Neme of Authorized Transporter of Casingened Gas (or Dry Gas)       Address folice address to which approved copy of this for         El Paso	NM 2A County	
Address       P.0. Box 1861, Midland, TX 79702         Reason(s) for tiling (Chrck proper box)       Dhange in Transporter of:         New Well       Condensate         Change in Ownership (Chrck proper box)       Diago in Transporter of:         Recompletion       Oil         Change in Ownership (X)       Casinghead Gas         Condensate       Condensate         If change of ownership give name sun TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II. DESCRIPTION OF WELL AND LEASE.         Lease Name       Kind of Lease         State "A" A/C-1       114         Jalmat Tansill Yates 7-Rivers       State. Peet From The South Line and 990         Unit Letter       I         Location       Unit Letter         Unit Letter       I         Receive of Commanic 23-S       Range         Neme of Authorized Transporter of Cill Commander       Address (Give address to which approved copy of this form Shell Pipeline Corporation         Name of Authorized Transporter of Casingered Gas Company       Fast Cillere address to which approved copy of this form Shell Pipeline Corporation         Neme of Linegoriter of Casingered Gas Company       Gas Cilleres filter address to which approved copy of this form Shell Pipeline Casingered Gas Company         It well produces of or trakes, data       Unit Sec. Twp. Pige.       Is gas actually conn	NM 2A County	
Reason(s) for tiling (Check proper box)       Other (Please explain)         New Weil       Other (Please explain)         Recompletion       Oil         Change in Ownership (X)       Casinahead Gas         If change of ownership give name and address of previous owner       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II. DESCRIPTION OF WELL AND LEASE       New Weil       New Yeil Poor Date, Intruding Formation         State "A" A/C-1       114       Jalmat Tansill Yates 7-Rivers         Location       Unit Letter       I       1650         Unit Letter       I       1650       Feet From The South Line and 990         Line of Section       21       Townsnip       23-S       Bange         Nome of Authorized Transporter of Oil (x) or Condensate       Address (Give address to which approved copy of this form Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casinghead Gas (x) or Dry des (Give address to which approved copy of this form El Paso Natural Gas Company       Feet Twp: [Rge.       Is gas actually connected?       When yes location of tarks.         If well produces oil or liquids, give location of tarks.       Unit 1 Sec.       Twp: [Rge.       Is gas actually connected?       When	NM 2A County	
New Well       Change in Transporter of:         Recompletion       Cil         Change in Ownership (X)       Casinchead Gas         If change of ownership (X)       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II. DESCRIPTION OF WELL AND LEASE       Casinchead Gas         Lease Name       X=1.15.1 Paor Hand, Intruding Formation         State "A" A/C-1       114         Jalmat Tansill Yates 7-Rivers       State, Federal or Fee State         Location       Unit Letter       I         Unit Letter       I       1650         Townsnip       23-S       Ranne         36-E       NMPM,       Lea         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       If well produced Transporter of Casingneed Gas (or Dry Gas)       Address (Give address to which approved copy of this formed Gas (or Dry Gas)         Name of Authorized Transporter of Casingneed Gas (or Dry Gas)       Address (Give address to which approved copy of this formed Gas (or Dry Gas)         Nome of Authorized Transporter of Casingneed Gas (or Dry Gas)       Address fis the address to which approved copy of this fo	NM 2A County	
Change in Ownership X       Casinchead Gas       Condensate         If change of ownership give name and address of previous owner       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II. DESCRIPTION OF WELL AND LEASE       Ease Name       Xet No. Poor Disc. list.uting Formation         State "A" A/C-1       114       Jalmat Tansill Yates 7-Rivers       State, Federal or Fee State         Lease Name       Xet No. Poor Disc. list.uting Formation       Kind of Lease         State "A" A/C-1       114       Jalmat Tansill Yates 7-Rivers       State, Federal or Fee State         Location       Unit Letter       1       : 1650       Feet From The South       Line and       990       Feet From The       East         Line of Section       21       Townsnip       23-S       Range       36-E       NMPM,       Lea         With DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Name of Authorized Transporter of Casingheed Gas or Orry Gas       Address (Give address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX 77001       Name of Authorized Transporter of Casingheed Gas or Dry Gas       Address (Give address to which approved copy of this form         E1 Paso Natural Gas Company       Jal, NM 88250       Yes       9-28-77         If well produces oil or liquids, give locacition of tanks.       Unit       Sec	NM 2A County	
If change of ownership give name and address of previous owner       SUN TEXAS COMPANY, P.O. Box 4067, Midland, TX 79704         II. DESCRIPTION OF WELL AND LEASE.       Ease Name       Keil No. Poor Name, intuding Formation         State "A" A/C-1       114       Jalmat Tansill Yates 7-Rivers       State, Federal or Fee State         Location       Unit Letter I       1650       Feet From The South       Line and       990       Feet From The       East         Line of Section       21       Townantp       23-S       Bange       36-E       NMPM,       Lea         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Nore of Authorized Transporter of Oil Comporation       Box 2648-Houston, TX 77001       Neme of Authorized Transporter of Casinghead Gas or Dry Gas       Address (Give address to which approved copy of this for         El Paso Natural Gas Company       -       Jal, NM 88250       Jal, NM 88250       Yes       9-28-77	NM 2A County	
and address of previous owner       SUN TEXAS COMPANT, P.O. BOX 4007, Mithalid, TX 73704         II. DESCRIPTION OF WELL AND LEASE         Lease Name       Weil NS. Pool Name, instuding Formation         State "A" A/C-1       114         Jalmat Tansill Yates 7-Rivers         State "A" A/C-1       114         Jalmat Tansill Yates 7-Rivers         State "A" A/C-1       114         Jalmat Tansill Yates 7-Rivers         State "A" A/C-1       114         Location       Unit Letter         Unit Letter       I         1650       Feet From The         South       Line and         990       Feet From The         East         Line of Section       21         Towmship       23-S         Range       36-E         Name of Authorized Transporter of Oil AND NATURAL GAS         Name of Authorized Transporter of Casinghead Gas () or Dry Gas         Address (Give address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casinghead Gas () or Dry Gas       Address (Give address to which approved copy of this form         El Paso Natural Gas Company       Jal, NM 88250       Yhen         If well produces of or l	NM 2A County	
II. DESCRIPTION OF WELL AND LEASF.         Lease Name       Well No. Pool Date, Intruding Formation       Kind of Lease         State "A" A/C-1       114       Jalmat Tansill Yates 7-Rivers       State, Federal or Fee State         Location       Unit Letter       I       1650       Feet From The       South       Line and       990       Feet From The       East         Line of Section       21       Townsnip       23-S       Bange       36-E       NMPM,       Lea         HI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Name of Authorized Transporter of Oil Corporation       Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casinghead Gas () or Dry Gas       Address (Give address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casinghead Gas () or Dry Gas       Address (Give address to which approved copy of this form         El Paso Natural Gas Company       Jal, NM 88250       If well produces oil or liquids, () Unit () Sec. () Twp. () Rge. () Is gas actually connected? () When () 9-28-77	NM 2A County	
Lease Name       Yeal No. Poor Name, including Formation       Kind of Lease         State "A" A/C-1       114       Jalmat Tansill Yates 7-Rivers       State, Federal or Fee State         Location       Unit Letter       I       1650       Feet From The       South       Oute and       990       Feet From The       East         Line of Section       21       Townsnip       23-S       Bange       36-E       NMPM,       Lea         UII.       DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Norme of Authorized Transporter of Oil Condensate       Address (Give address to which approved copy of this formation         Name of Authorized Transporter of Casinghed Gas Condensate       Address (Give address to which approved copy of this formation         Name of Authorized Transporter of Casinghed Gas Condensate       Address (Give address to which approved copy of this formation)         Name of Authorized Transporter of Casinghed Gas Condensate       Jal, NM 88250         If well produces oil or liquids,       Unit       Sec.       Twp.       Page.       Is gas actually connected?       When         give location of tarks.       Jal, 21       23       36       Yes       9-28-77	NM 2A County	
Lecation       Unit Letter       I       : 1650       Feet From The       South       Line and       990       Feet From The       East         Line of Section       21       Townsnip       23-S       Bange       36-E       . NMPM,       Lea         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of OIL & or Condensate       Address (Give address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casinghead Gas (or Dry Gas)       Address (Give address to which approved copy of this form         El Paso Natural Gas Company       Jal, NM 88250         If well produces oil or liquids,       Unit         Unit       Sec.       Twp.         If well produces oil or liquids,       Unit         Jal, 21       23       36         Yes       9-28-77	County	
Unit Letter       I       1650       Feet From The       South       Line and       990       Feet From The       East         Line of Section       21       Township       23-S       Range       36-E       NMPM,       Lea         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of OIL       or Condensate       Address (Give address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX       77001         Name of Authorized Transporter of Casinghead Gas () or Dity Gas       Address (Give address to which approved copy of this form         El Paso Natural Gas Company       Jal, NM       88250         If well produces oil or liquids, give location of tanks,       Unit       Sec.       Twp.       Ree.       Is gas actually connected?       When         give location of tanks,       Jaly 21       23       36       Yes       9-28-77	•	
Line of Section       21       Towmship       23-S       Range       36-E       , NMPM,       Lea         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of OIL (C)       or Condensate       Address (Give address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casingneed Gas (C)       or Dity Gas (C)       Address (Give address to which approved copy of this form         El Paso Natural Gas Company       Jal, NM 88250       Jal, NM 88250       Yhen         If well produces oil or liquids, give location of tanks,       Jal 21       Z3       36       Yes       9-28-77	•	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Oil is or Condensate         Shell Pipeline Corporation         Name of Authorized Transporter of Casingneed Gas is or Dry Gas         Address (Give address to which approved copy of this form         Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casingneed Gas is or Dry Gas         Address (Give address to which approved copy of this form         El Paso Natural Gas Company         If well produces oil or liquids,         Unit       Sec. Twp.         Rive location of tanks.       J         J       21         23       36         Yes       9-28-77	•	
Name of Authorized Transporter of Oil Condensate       Address (Give address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casinghead Gas Corporation       Address (Give address to which approved copy of this form         El Paso Natural Gas Company       Jal, NM 88250         If well produces oil or liquids, give location of tanks.       Unit         Jal 21       23         Jal 21       23	m is to be sent;	
Name of Authorized Transporter of Oil Condensate       Address (Give address to which approved copy of this form         Shell Pipeline Corporation       Box 2648-Houston, TX 77001         Name of Authorized Transporter of Casinghead Gas Corporation       Address (Give address to which approved copy of this form         El Paso Natural Gas Company       Jal, NM 88250         If well produces oil or liquids, give location of tanks.       Unit         Jal 21       23         Jal 21       23	m is to be sent;	
Name of Authorized Transporter of Casinghead Gas (2) or Dry Gas       Address (Give address to which approved copy of this form         E1       Paso Natural Gas Company       Jal, NM 88250         If well produces oil or liquids, give location of tanks.       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When         9-28-77		
El Paso Natural Gas CompanyJal, NM 88250If well produces oil or liquids, give location of tanks.Unit J 21 23 36 YesSec.Unit 9-28-77	·	
If well produces oil or liquids,     Unit     Sec.     Twp.     Rge.     Is gas actually connected?     When       give location of tanks.     J     21     23     36     Yes     9-28-77	m is to be sent;	
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA		
	e Resty. Diff. Rest	
Date Spudded Date Compl. Ready to Prod. Tota: Depth P.B.T.D.	l	
Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top Oil/Gas Pay Tubing Depth		
Perforations Depth Casing Sho		
TURING, CASING, AND CEMENTING RECORD		
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS	CEMENT	
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of social volume of load oil and must be equal t	o or exceed top allo	
OIL WELL able for this depth or be for full 24 hours) Date First New Oil Run To Tanks (Date of Test (Producing Method (Flow, pump, gas ii/i, etc.)		
Length of Test Tubing Pressure Casing Pressure Choke Size		
Actual Prod. During Test Cil-Bbis. Water-Bbis. Gas-MCF		
GAS WELL Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condes	nacia	
Testing Method (pitot, back pr.) Tubing Pressure (Bhut-in) Casing Pressure (Shut-in) Choke Size		
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMIS		
li l		
I 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.	BYStyned by	
тітье тітье		
11 This form is to be filed in compliance with r		
This form is to be filed in compliance with F If this is a request for allowable for a newly	RULE 1104. drilled or deepene	
(Signature) If this is a request for allowable for a newly well, this form must be accompanied by a tabulati	RULE 1104. drilled or deepene ion of the deviatio	
(Signature) Production/Proration Supervisor (Title) (Title) (Signature) (Signa	RULE 1104. drilled or deepene ion of the deviatio E 111.	
(Signature) Production/Proration Supervisor All continues of the form must be accompanied by a tabulative tests taken on the well in accordance with RULE	RULE 1104. drilled or deepene ion of the deviatio E 111. ompletely for allow changes of owner	