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TRANSPORTER	OIL / GAS
OPERATOR	4
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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JAN 31 1967

I.

Operator Gulf Oil Corporation	
Address Box 670, Hobbs, New Mexico	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	New Well
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Littlefield "AP" Federal	Well No. 5	Pool Name, Including Formation Grayburg - Grayburg	Kind of Lease State, Federal or Fee Fed - NM-014203	Lease No.
Location				
Unit Letter M	330	Feet From The South	Line and 710	Feet From The West
Line of Section 22	Township 18-S	Range 31-E	, NMPM, Eddy County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Co.	Box 1510, Midland, Texas
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Vented - waiting on connection	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
K 22 18-S 31-E	No

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-5-67	Date Compl. Ready to Prod. 1-27-67	Total Depth 4000'	P.B.T.D. 3966'					
Elevations (DF, RKB, RT, GR, etc.) 3642' GL	Name of Producing Formation Grayburg	Top Oil/Gas Pay 3909'	Tubing Depth 3942'					
Perforations 3909' (4 way free jets in place)	Depth Casing Shoe 3997'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	631'	450 sacks (Circulated)					
7-7/8"	5-1/2"	3997'	400 sacks (TOG at 1735')					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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 1-27-67	Date of Test 1-28-67	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 11 hours	Tubing Pressure --	Casing Pressure --	Choke Size 28
Actual Prod. During Test 70	Oil - Bbls. 70	Water - Bbls. --	Gas - MCF --

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)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the Oil Conservation
mmission have been complied with and that the information given
ove is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED BY
C. D. BORLAND

(Signature)

as Production Manager

(Title)

January 30, 1967

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JAN 31 1967**, 19

BY **W. A. Grissett**

TITLE **OIL AND GAS CONSERVATION**

This form is to be filed in compliance with RULE 1104.

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,
well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply
completed wells.