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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

Operator Gulf Oil Corporation	
Address Box 670, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	
New Well	<input type="checkbox"/>
Recompletion	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>
Change in Transporter	<input checked="" type="checkbox"/>
Change in Gas	<input type="checkbox"/>
Change in	<input type="checkbox"/>
Change in transporter, effective 3-1-67	

If change of ownership give name
and address of previous owner

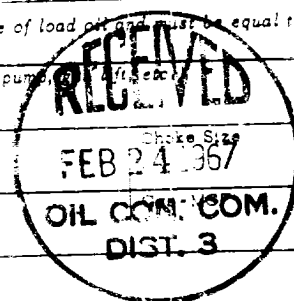
II. DESCRIPTION OF WELL AND LEASE		Lease No.
Lease Name Apache Federal	8 Basin Dakota	Federal
Location Unit Letter D 990 Feet From The north Line and 990 Feet From The west		
Line of Section 8	Township 24N	Range 5W Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (If address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Gas <input type="checkbox"/> The Permian Corporation		P. O. Box 3119, Midland, Texas 79701
Name of Authorized Transporter of Gas <input checked="" type="checkbox"/> or Oil <input type="checkbox"/> El Paso Natural Gas Co.		Box 1161, El Paso, Texas
If well produces oil or liquids, give location of tanks.	D 8 24N 5W	Is gas actually connected? Yes When Unknown

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

IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Flow Back	Same Section	Diff. Res'v.
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.	Total Depth		S.B.H.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Bore		Tubing Depth					
Perforations		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					

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	Date of Test	Producing Method (Flow, pump, or lift)	
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil Bbls.	Water - Bbls.	



GAS WELL		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test - MCF/D	Length of Test				
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)		Choke Size	

VI. CERTIFICATE OF COMPLIANCE

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

OIL CONSERVATION COMMISSION FEB 24 1967	
APPROVED	19
BY	Original Signed by Emery C. Arnold
TITLE	SUPERVISOR DIST. #3

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 allowable 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.

Area Production Manager

2-24-67