NO. OF COPIES RECEIVED			7		
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SANTA FE		1			
FILE		1	1		
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL	1_			
	GAS	1			
OPERATOR		3			
			-		

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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

1 4000

	1 / 4		AND	Effective 1-1-65
U.S.G.S.	1	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
LAND OFFICE		ACTIONIZATION TO IN	AND ON FOIL AND MATURAL	· Unu
TRANSPORTER GAS	1			
OPERATOR	3			
PRORATION OFFICE				
Oulf Oil Corpore	tion			
Box 670, Hobbs,	New He	stico 88240		
Reason(s) for filing (Check)	proper box)		Other (Please explain)	
New Well		Change in Transporter of:	Change in Trans	porter, effective 3-1-6
Recompletion Change in Ownership		Oil Dry C	ensate	
If change of ownership giv	e name		<u> </u>	
and address of previous ov				
DESCRIPTION OF WEL	L AND I	Well No. Pool Name, Including	Formation Kind of Le	ease Lease
West Risti Unit		124 Bisti Lower		eral or Fee Fed. 07809
Location				
Unit Letter	.; <u>6</u>	Feet From The north L		om The
Line of Section	Tow	mship 26-N Range	13-¥ , NMPM,	Sen Juan co
DESIGNATION OF TRA	NEDODI	TER OF OIL AND NATURAL G	248	
Name of Authorized Transpo	rter of Oil	or Condensate	Address (Give address to which ap	proved copy of this form is to be sent)
Name of Authorized Transpo	rter of Cas	inghead Gas 🗗 or Dry Gas 🗔	Box 1150, Midland, To Address (Give address to which ap	proved copy of this form is to be sent)
El Pago Natural	Gas (lo	wbest.	Box 1161, Kl Paso, T	When
If well produces oil or liquid give location of tanks.	is,	Unit Sec. Twp. Rge. 26-N 13-1		1-1-60
If this production is commit	ingled mit	h that from any other lease or pool	give commingling order number	
. COMPLETION DATA	rusien Mil			
Designate Type of C	ompletio	on - (X) Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff.
Date Spudded	F	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
		The state of the s		
Elevations (DF, RKB, RT, C	GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			<u> </u>	Depth Casing Shoe
		TIMINA ALTINA	NO CEMENTING DECORD	
HOLE SIZE		TUBING, CASING, AI	ND CEMENTING RECORD DEPTH SET	SACKS CEMENT
HOLE SIZE		CASING & LOBING SIZE	OCT IN SET	ONORS GENERAL
				100
. TEST DATA AND REQ	UEST F	OR ALLOWABLE (Test must be	after recovery of total volume of load depth or be for full 24 hours)	oil and must be seed so or exceed so
OIL WELL Date First New Oil Run To	Tanks	Date of Test	Producing Method (Flow, pump, ga	
Length of Test		Tubing Pressure	Casing Pressure	Choke izou con con
Zandru at Tant				OIL CON
		Oil-Bbls.	Water - Bbls.	Gas - MCF
Actual Prod. During Test		·		
Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
GAS WELL	pr.)	Length of Test Tubing Pressure (Shut-in)	Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Gravity of Condensate Choke Size
GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
GAS WELL Actual Prod. Test-MCF/D		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) OIL CONSER	Choke Size
GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back) I. CERTIFICATE OF CO	MPLIAN	Tubing Pressure (Shut-in) CE regulations of the Oil Conservation	Casing Pressure (Shut-in) OIL CONSER	Choke Size VATION COMMISSION EB 2 1 1967
GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back CERTIFICATE OF CO I hereby certify that the r Commission have been c	MPLIANO	Tubing Pressure (Shut-in)	OIL CONSER APPROVED Original Signed	Choke Size
GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back CERTIFICATE OF CO I hereby certify that the r Commission have been c	MPLIANO	Tubing Pressure (shut-in) CE regulations of the Oil Conservation with and that the information gives	OIL CONSER APPROVED F Original Signed	Choke Size VATION COMMISSION EB 2 1 1967

(Signature)

(Title)

(Date)

Area Production Manager

February 21, 1967

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.

Oulf Oil Corporation

Box 670, Hobbes New Mexico 98640

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Fibruary 21, 1967

Area Production Manager