

DISTRIBUTION	
CARTAGE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-101
Superseding O-101 and O-11
Effective 1-1-65

Operator Gulf Oil Corporation	
Address P. O. Box 670, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☒	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐
Re-completion ☐	
Change in Ownership ☐	

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Scott "E" Federal	Well No. 18	Pool Name, including Formation W. Kutz Pictured Cliffs	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078089
Location Unit Letter N : 990 Feet From The South Line and 1520 Feet From The West				
Line of Section 36 Township 27N Range 11W NMPM, San Juan County				

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 is to be sent)					
None						
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
Gas Company of New Mexico	Box 1899, Bloomfield, NM 87413					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 36	Twp. 27N	Rge. 11W	Is gas actually connected? No	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Res't.	Diff. Res't.
		XX	XX					
Date Spudded 11-2-80	Date Compl. Ready to Prod. 12-21-80	Total Depth 2100'	P.B.T.D. 2069'					
Elevations (OF, RKB, RT, CR, etc.) 6473' GL	Name of Producing Formation West Kutz	Top Oil/Gas Pay 2012'	Tubing Depth 2034'					
Perforations 2012-28'	Depth Casing Shoe --							

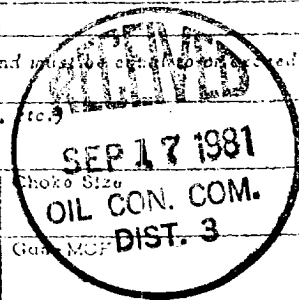
TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE 8-3/4"	CASING & TUBING SIZE 7"	DEPTH SET 90'	SACKS CEMENT 50
6 1/2"	2-7/8"	2100'	375

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and initial casinghead pressure and top allow-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 lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.



GAS WELL

Actual Prod. Test-MCF/D 349	Length of Test 24 hrs	Lbbs. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (flow, back pr.) flow	Tubing Pressure (shut-in) 85#	Casing Pressure (shut-in) 0	Choke Size --

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.

R. D. Pite
(Signature)

Area Engineer

(Title)

9-14-81

OIL CONSERVATION COMMISSION

SEP 28 1981

APPROVED

Original Signed by FRANK T. CHAVEZ

BY

SUPERVISOR DISTRICT # 3

TITLE

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 available 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 re-completed wells.

Fill out only the items I, II, III, and VI for changes of owner or transporter or other such changes of ownership.