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TRANSPORTER	OIL	
	GAS	
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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 P.O. Box 98; Andrews, Texas	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE				
Lease Name Lea "OG" State	Well No. 1	Pool Name, Including Formation North Bagley Upper Pennsylvanian	Kind of Lease State, Federal or Fee	Lease No. E-26
Location				
Unit Letter K	1980	Feet From The West	Line and 1980	Feet From The South
Line of Section 9	Township 11-S	Range 33-E	, NMPM, Lea County	

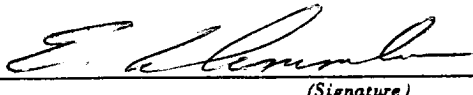
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Pan American Petroleum Corp. - Trucks P.O. Box 1725; Midland, 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) Warren Petroleum Corp. 725 Gulf Bldg.; Midland, Texas					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 9	Twp. 11S	Rge. 33E	Is gas actually connected? No	When Soon as possible

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 <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Rest'v. <input type="checkbox"/> Diff. Rest'v. <input type="checkbox"/>		
Date Spudded 11-14-67	Date Compl. Ready to Prod. 12-26-67	Total Depth 10270'	P.B.T.D. 10240'
Elevations (DF, RKB, RT, GR, etc.) 4304' RT-4288' GR	Name of Producing Formation Upper Penn	Top Oil/Gas Pay 9386'	Tubing Depth 9543'
Perforations 9386-9392' and 9519-9530' w/2 - 1/2" JHPT.		Depth Casing Shoe 10270'	
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8" OD	367'	350 Sx Incer 25
11"	8 5/8" OD	3600'	400 Sx Incer 16 1/4 + 1000 Sx In.
7 7/8"	5 1/2" OD	10270'	800 Sx Incer 16 1/4 + 400 Sx Incer
Tubing	2 3/8" OD	9543'	

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 12-28-67	Date of Test 12-29-67	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 19 Hours	Tubing Pressure 300 psig	Casing Pressure Packer	Choke Size 2 1/4" 64"
Actual Prod. During Test	Oil-Bbls. 279	Water-Bbls. 123	Gas-MCF 561

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

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.	
	
Area Engineer	
(Title)	
December 29, 1967	
(Date)	

OIL CONSERVATION COMMISSION	
DEC 29 1967	
APPROVED _____, 19 _____	
BY _____	
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 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.	

