

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

OCT 22 3 35 PM '65

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. Operator
Gulf Oil Corporation
 Address
Box 670, Hobbs, New Mexico

Reason(s) for filing (Check proper box) Other (Please explain)
 New Well Change in Transporter of: Oil Dry Gas
 Recompletion Oil Condensate
 Change in Ownership Casinghead Gas **Change in ownership, effective 10-1-65. Was Cactus' Drilling Company's Phillips-State "G" No. 2**

If change of ownership give name and address of previous owner **Cactus Drilling Company, Box 1826, Hobbs, New Mexico**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Phillips-State "C" State	Well No. 2	Pool Name, including Formation East Pearl - Seven Rivers	Kind of Lease State, Federal or Fee State
Location Unit Letter L ; 2310 Feet From The South Line and 330 Feet From The West Line of Section 32 , Township 19-S Range 35-E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None - Dry Gas Well	Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Phillips Petroleum Company	Phillips Bldg., 4th & Washington, Odessa, Tex.		
If well produces oil or liquids, give location of tanks. Produces no liquids	Unit	Sec.	When
			Unknown

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
Pool	Name of Producing Formation	Top Oil/Gas Pay		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, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	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	Casing Pressure	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.

ORIGINAL SIGNED BY
 C. D. BORLAND

(Signature)

Area Production Manager

(Title)

October 21, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY *Joe H. Amy*

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 Sections I, II, III, and VI only 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.