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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

SEP 17 1969

I. OPERATOR

Operator
Gulf Oil Corporation

Address
Box 670, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

Re-entered plugged and abandoned well

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Graham State (NCT-F)	Well No. 3	Pool Name, including Formation Monument G-SA	Kind of Lease State, Federal or Fee State	Lease No. 18634
Location				
Unit Letter J	1980	Feet From The South Line and 1980	Feet From The East	
Line of Section 36	Township 19-S	Range 36-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)			
Shell Pipe Line Corporation	Box 1910, 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 Corporation	Box 1589, Tulsa, Oklahoma			
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 36	Twp. 19-S	Rge. 36-E
	Is gas actually connected?		When	
	Yes		9-13-69	

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	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Re-entered	XX			XX				
Date XXXX 9-2-69	Date Compl. Ready to Prod. 9-13-69	Total Depth 3921'	P.B.T.D. 3660'					
Elevations (DF, RKB, RT, GR, etc.) 3593' GL	Name of Producing Formation Monument G-SA	Top Oil/ W Pay 3526'	Tubing Depth 3497'					
Perforations 3623-25', 3590-92', 3546-48' and 3526-28'.		Depth Casing Shoe 3855'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13-1/4"	10-3/4"	273'	150 sacks (Circulated)					
9-7/8"	7-5/8"	2336'	300 sacks					
6-3/4"	5-1/2"	3855'	150 sacks					
	2-3/8"	3497'						

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 9-13-69	Date of Test 9-15-69	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 350#	Casing Pressure 120#	Choke Size 2 1/2"
Actual Prod. During Test 5	Oil - Bbls. 1	Water - Bbls. 4	Gas - MCF 516

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.

ORIGINAL SIGNED BY
C. E. MACE

 (Signature)
Area Petroleum Engineer
 (Title)
September 16, 1969
 (Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 17 1969, 19____

BY John W. Rungas

TITLE Geologist

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.