

SEP 18 1972

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
ARTESIA, OFFICE
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASForm C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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

Operator	
Gulf Oil Corporation	
Address	
Box 670, Hobbs, New Mexico 88240	
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)	
New Well CASINGHEAD GAS MUST NOT BE FLARED AFTER 11-10-72 UNLESS AN EXCEPTION TO Rule 30.6 IS OBTAINED	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Holder CB (NCT-A) Federal	2	Grayburg Jackson :	State, Federal or Fee Federal	LC-056551A
Location				
Unit Letter D	660	Feet From The North	Line and 660	Feet From The West
Line of Section 17	Township 17-S	Range 30-E	NMPM,	Eddy 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)	
The Permian Corporation	Box 3119, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
None - Gas is vented		
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 17
	Twp. 17-S	Rge. 30-E
	Is gas actually connected? No	
	When	

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.
XX	XX		XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.				
8-17-72	9-10-72	3700'		3660'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth				
3666' GL	Queen Grb, SA	2467'		2434'				
Perforations	Depth Casing Shoe							
2467' to 3412'	3699'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		463'		250 sacks (Circulated)			
7-7/8"	5-1/2"		3699'		770 sacks (TOC at 785')			
	2-3/8"		3434'					

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.)	
9-10-72	9-15-72	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	125#	0#	20/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
325 barrels	85	240 (Load)	--

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.C. D. Kallies
(Signature)

Area Engineer

(Title)

September 15, 1972

(Date)

OIL CONSERVATION COMMISSION

SEP 20 1972

APPROVED _____, 19

BY W. A. GressettTITLE OIL AND GAS INSPECTOR

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 allow-
able 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 well in this class.

WELL NAME AND NUMBER Holder "CB" Fed. (NCT-A) #2
LOCATION 660' FNL & 660' FWL, Sec. 17, T-17-S, R-30-E
(New Mexico give U,S,T & R; Texas give S,Blk.,Sur.& Twp.when required)
OPERATOR GULF OIL CORPORATION
DRILLING CONTRACTOR Capitan Drilling Company, Inc.

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:


<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>	<u>Degrees @ Depth</u>
<u>1/4 @ 291</u>	<u> </u>	<u> </u>	<u> </u>
<u>1/4 @ 463</u>	<u> </u>	<u> </u>	<u> </u>
<u>1/4 @ 721</u>	<u> </u>	<u> </u>	<u> </u>
<u>1/2 @ 969</u>	<u> </u>	<u> </u>	<u> </u>
<u>3/4 @ 1186</u>	<u> </u>	<u> </u>	<u> </u>
<u>1/2 @ 2094</u>	<u> </u>	<u> </u>	<u> </u>
<u>3/4 @ 2469</u>	<u> </u>	<u> </u>	<u> </u>
<u>1 1/2 @ 3285</u>	<u> </u>	<u> </u>	<u> </u>
<u>1 1/4 @ 3700</u>	<u> </u>	<u> </u>	<u> </u>
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Drilling Contractor Capitan Drilling Co., Inc.

By 

Subscribed and sworn to before me this 6 day of September, 1972

My Commission Expires:
June 1, 1973


Notary Public
Ector County, Texas