

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-1
Effective 1-1-65

RECEIVED

NOV 15 1974

I.

Operator	C.O. Fulton ✓			O. C. C.		
Address	ARTESIA, OFFICE					
Reason(s) for filing (Check proper box)	P.O. Box 1121, Artesia, New Mexico 88210 CASINGHEAD GAS MUST NOT BE					
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	Other (Please explain) <u>DECLARED AFTER 12-28-74</u>			
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>	UNLESS AN EXCEPTION TO RULE
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>	IS OBTAINED
If change of ownership give name and address of previous owner <u>C.E. Roach Drilling Company, Box 157, Artesia, N.M.</u>						

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Gulf State	Well No.	1	Pool Name, Including Formation	Artesia	Kind of Lease	State, Federal or Fee	State	Lease No.	E 828
Location	Unit Letter <u>N</u> ; <u>2310</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>East</u>									
Line of Section	18	Township	18S	Range	28E	, NMPM, <u>Eddy</u> 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)					
<u>Navajo Ref. Co. - Pipeline Division</u>	<u>North Freeman, Artesia, N.M. 88210</u>					
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)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	1	18	18S	28E	No	

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.
<u>X</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
<u>1-10-70</u>	<u>10-21-73</u>		<u>2260'</u>		<u>2197</u>			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
<u>3608 GR</u>	<u>Matex</u>		<u>1970-1985</u>		<u>1960'</u>			
Perforations					Depth Casing Shoe			
<u>1974-86</u>					<u>2197</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>10 3/4</u>	<u>8 5/8</u>		<u>447'</u>		<u>50</u>			
<u>8 5/8</u>	<u>4 1/2</u>		<u>2197'</u>		<u>100</u>			
	<u>2 3/8"</u>		<u>1960</u>					

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.)	
<u>10-28-73</u>	<u>10-29-74</u>	<u>Pump</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
<u>72 hrs</u>	<u>120</u>	<u>Acid Water - 15 bbls</u>	<u>Enough to run pump jack motor.</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
<u>135 bbls.</u>	<u>120</u>	<u>Acid Water - 15 bbls</u>	<u>Enough to run pump jack motor.</u>

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. O. Fulton
(Signature)
Owner
(Title)
11-15-74
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 21 1974
BY W. A. Susselt
TITLE 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 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 well in multiple