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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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
Effective 1-1-65

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JUL 17 1978

I.

Operator Gulf Oil Corporation		O. C. C. ARTESIA, OFFICE
Address P. O. Box 670, Hobbs, New Mexico 88240		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well	☐	Change in Ownership effective 7-1-78
Recompletion	☐	
Change in Ownership	☒	
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐		

If change of ownership give name and address of previous owner Kewanee Oil Company, P. O. Box 3786, Odessa, Texas 79760

II. DESCRIPTION OF WELL AND LEASE

Lease Name Feather Communitized	Well No. 1	Pool Name, including Formation Red Lake Penn	Kind of Lease SOLE, EXCLUSIVE, EXCLUSIVE Fee	Lease No.
Location Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line of Section 18 Township 18S Range 27E, NMPM, Eddy Count				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Navajo Crude Oil Purchasing	Address (Give address to which approved copy of this form is to be sent) North Freeman Ave., Artesia, NM 88210			
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Natural Gas Pipeline Co. of America Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) P. O. Box 283, Houston, TX 77001 First International Bldg., Dallas, TX 75201			
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 18	Twp. 18S	Pge. 27E
Is gas actually connected?		When 10-22-75 - NGP 2-09-76 - GC of NM		

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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RNB, RT, GR, etc.)	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 Press. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Press. During Test-MCF/24	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Tubing Pressure (Shut-in)	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.

OIL CONSERVATION COMMISSION

APPROVED JUL 20 1978

BY W. A. Gressett

TITLE SUPERVISOR, DISTRICT II

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 deviated 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 own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-completed well.

Area Engineer

July 17, 1978