

APPLICATION FOR CONTINUED
STRIPPER CLASSIFICATION

FOR DIVISION USE ONLY:	
DATE COMPLETE APPLICATION FILED _____	RECEIVED BY JUN 21 1984 O. C. D. ARTESIA, OFFICE
DATE DETERMINATION MADE _____	
WAS APPLICATION CONTESTED? YES _____ NO _____	
NAME(S) OF INTERVENOR(S), IF ANY: _____	
2. Name of Operator <u>Gulf Oil Corporation</u>	
3. Address of Operator <u>P. O. Box 1150, Midland, TX 79702</u> <u>P. O. Box 670, Hobbs, NM 88240</u>	
4. Location of well UNIT LETTER <u>F</u> LOCATED <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>19</u> TWP. <u>18S</u> RGE. <u>25E</u> NMPM	
11. Name and Address of Purchaser(s) <u>El Paso Natural Gas Co., P. O. Box 1492, El Paso, TX 79999</u>	

5A. Indicate Type of Lease STATE ☒ FEE ☐
5. State Oil & Gas Lease No. <u>L-423</u>
7. Unit Agreement Name
8. Farm or Lease Name <u>Eddy GK State Com</u>
9. Well No. <u>2</u>
10. Field and Pool, or Wildcat <u>Penasco Draw Morrow</u>
12. County <u>Eddy</u>

CLASSIFICATION

1. Check appropriate box for category sought and information submitted.
2. All applications must contain the items required by the applicable rule of the Division's "Special Rules For Applications For Wellhead Price Ceiling Category Determinations" as follows:
 - A. Increased production resulting from recognized enhanced recovery techniques
☐ All items required by Rule 19
 - B. Well is seasonally affected
☐ All items required by Rule 20
 - C. Increased production resulting from temporary pressure buildup
☒ All items required by Rule 21

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED
HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY
KNOWLEDGE AND BELIEF.

R. C. Anderson
NAME OF APPLICANT (Type or Print)
R. C. Anderson
SIGNATURE OF APPLICANT
Title Area Production Manager
Date 6-13-84

FOR DIVISION USE ONLY	
☐ Approved	The information contained herein includes all of the information required to be filed by the applicant under Subpart 6 of Part 274 of the FERC regulations.
☐ Disapproved	
EXAMINER _____	