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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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

RECEIVED
MAR 14 1967
O. C. C.
ARTESIA, OFFICE

I. Operator
Gulf Oil Corporation
Address
Box 670, Hobbs, New Mexico
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
New Well

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name General Energy Corp. Fed.	Well No. 1	Pool Name, including Formation Lusk Strawn R3237	Kind of Lease State, Federal or Fee Fed.	Lease No. NM-036739
Location Unit Letter N ; 660 Feet From The South Line and 1980 Feet From The West Line of Section 11 Township 19-S Range 31-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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None - Gas is vented - waiting on tank battery construction.	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 N	Sec. 11	Twp. 19-S	Rge. 31-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) XX	Oil Well <input type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 1-26-67	Date Compl. Ready to Prod. March 3-12-67		Total Depth 11,333'		P.B.T.D. 11,261'			
Elevations (DF, RKB, RT, GR, etc.) 3562' OL	Name of Producing Formation Strawn		Top Oil/Gas Pay 11,168'		Tubing Depth 11,102'			
Perforations 11,168-70', 11,178-80' & 11,192-94'.					Depth Casing Shoe 11,328'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	704'	405 Sacks (Circulated)
11"	8-5/8"	3950'	775 Sx (TS - TOC @ 2155')
7-7/8"	5-1/2"	11,328'	375 Sx (TS - TOC @ 8980')
	2-3/8"	11,102'	

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 March 12, 1967	Date of Test March 13, 1967	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 1060#	Casing Pressure --	Choke Size 20/64"
Actual Prod. During Test 456	Oil-Bbls. 456 (avg 47.5 Cor)	Water-Bbls. --	Gas-MCF 1160

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. D. BRIDGES

(Signature)

Area Production Manager

(Title)

March 14, 1967

(Date)

OIL CONSERVATION COMMISSION

MAR 14 1967

APPROVED _____, 19____

BY **W. A. Gressett**
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 pool in multiply completed wells.