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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

FEB 23 1970

Operator Gulf Oil Corporation		ARTESIA, OFFICE	
Address Box 670, Hobbs, New Mexico 88240			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	New Well	
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"/>		

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Littlefield "A5" Federal	Well No. 8	Pool Name, Including Formation Shugart - Queen	Kind of Lease State, Federal or Fee Federal	Lease No. NM-014103
Location				
Unit Letter A	660	Feet From The North	Line and 660	Feet From The East
Line of Section 22	Township 18-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"/>	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Box 460, Hobbs, New Mexico 88240			
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 22	Twp. 18-S	Rge. 31-E
	Is gas actually connected?			When 2-18-70

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 <input checked="" 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'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded 1-30-70	Date Compl. Ready to Prod. 2-13-70	Total Depth 3500'		P.B.T.D. 3166'				
Elevations (DF, RKB, RT, GR, etc.) 3676' OL	Name of Producing Formation Queen	Top Oil Pay 3375'		Tubing Depth 3150'				
Perforations 3375' to 3385'			Depth Casing Shoe 3499'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		732'		350 sacks (Circulated)			
7-7/8"	4-1/2"		3499'		425 sacks (TOG at 1370')			
	2-3/8"		3450'					

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 2-13-70	Date of Test 2-14-70	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 10 hours (Swab test)	Tubing Pressure --	Casing Pressure --	Choke Size 2"
Actual Prod. During Test 140 barrels	Oil-Bbls. 70	Water-Bbls. 70 (Load water)	Gas-MCF --

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. BORLAND

(Signature)

Area Production Manager

(Title)

February 20, 1970

(Date)

OIL CONSERVATION COMMISSION

FEB 24 1970

APPROVED _____, 19 _____

BY **W. P. 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.

WELL NAME AND NUMBER Littlefield "AB" Federal #1

LOCATION 660' FNL & 660' FEL, S-22, T-18-S, R-31-E, Eddy County
(New Mexico give U,S,T & R; Texas give S,Blk.,Sur.& Twp.when required)

OPERATOR GULF OIL CORPORATION

DRILLING CONTRACTOR Cactus Drilling Company

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>300'</u>	<u>1/2</u>	<u>2.6100</u>	<u>2.6100</u>
<u>500'</u>	<u>1/2</u>	<u>1.7400</u>	<u>4.3500</u>
<u>637'</u>	<u>1/2</u>	<u>1.1919</u>	<u>5.5419</u>
<u>732'</u>	<u>1/2</u>	<u>0.8265</u>	<u>6.3684</u>
<u>1220'</u>	<u>3/4</u>	<u>6.3928</u>	<u>12.7612</u>
<u>1718'</u>	<u>3/4</u>	<u>6.5238</u>	<u>19.2850</u>
<u>2312'</u>	<u>1/2</u>	<u>5.1678</u>	<u>24.4528</u>
<u>2750'</u>	<u>1/2</u>	<u>3.8106</u>	<u>28.2634</u>
<u>3400'</u>	<u>1/2</u>	<u>5.6550</u>	<u>33.9184</u>
<u>3500'</u>	<u>3/4</u>	<u>1.3100</u>	<u>35.2284</u>
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<u> </u>	<u> </u>	<u> </u>	<u>O. U. O.</u>
<u> </u>	<u> </u>	<u> </u>	<u>ARTESIA, OFFICE</u>

Drilling Contractor Cactus Drilling Co.

By Ronnie Ramsey

Subscribed and sworn to before me this 10 day of February, 1970

My Commission Expires:

Feb 6, 1973

Argene R. Brown
Notary Public
Lea County, New Mexico