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U.S.G.5.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS	1		
OPER FOR		1		
PROPATION OFFICE				
Operator			•	
GULF OIL	CORPO	RAT	ION	
Address				
P. O. Box	670,	Н	obb:	

III.

IV.

Form C-104

	FILE /	=	REQUEST FOR ALLOWABLE			Supers Dilect	Supersedes Old C-104 and C Elioctive 1-1-65	
	U.S.G.S.							
	LAND OFFICE FRANSPORTER OIL					RFI	7512-	
	OPERATOR /						RECEIVED	
1.	PROPATION OFFICE					JUI	123 1978	
	GULF OIL CORPORATION	GULF OIL CORPORATION					. ר. ר	
	P. O. Box 670, Hobbs, New Mexico 88240					SIA, OFFICE		
	Reason(s) for filing (Check proper box	i)	160 88240		Other (Please explain)			
	New Well X Recompletion	Change in T Cil	ransporter of: Dry (Gas [
	Change in Ownership	Casinghead	Gas Cond	ensate 🗌				
	If change of ownership give name and address of previous owner		14.					
**		LEASE RG	71.80	10 Pa	Q At.B.	-m-10-11		
***	Lease Name Well No. Pool Name, Inglight Found Wind of Lease						Lease No.	
	Pacheco Federal	1 1	Under gnoted	Morrow	State, Fe	deral or Fee Fede:	ra1 NM 4986	
	Unit Letter J ; 198	BO Feet From	The South L	Ine and	1980 Feet Fr	om The East		
	Line of Section 31 Tov	wnship 19-S	S Range	28 - E	, NMPM,	Eddy	County	
	NEGOCIA CON CEL MENTO DE							
H.	Name of Authorized Transporter of Oil		ND NATURAL G		Give address to which a	oproved copy of this f	orm is to be sent)	
	Name of Authorized Transporter of Cas	Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be						
	El Paso Natural Gas Company P. O. Box 1384, Jal, New							
	If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Ege.	Is gas act	vally connected?	When - 7-/		
	If this production is commingled wit	th that from any o	other lease or pool		/		4 20	
IV.	COMPLETION DATA	011 \	Well Gas Well	New Well	Workover Deepen	Plug Back Sc	me Res'v. Diff. Res'v.	
	Designate Type of Completio		X	X	} } 			
	Date Spudded 10-1-77	Date Comp!. Read 12-7-7	•	Total Dep	11,090'	P.B.T.D.	343 '	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producin		Top Oti/O	as Pay	Tubing Depth	749	
	3368' GL Morrow Perforations			1	10,742'	Depth Casing S	595 '	
	10,742' - 10,830' Morrow					11,0	11,089'	
	HOLE SIZE	TUBING, CASING, AN		D CEMENTING RECORD DEPTH SET		SACK	SACKS CEMENT	
	17-1/2"	13-3/8"	48#		418'	420 sx -		
	12-1/4" 7-7/8"	8-5/8" 5-1/2"	28非 20非 & 17非		2,905' 1,089'	975 sx -	- Circ - TSITOC @	
	7-778	2-3/8"	2017 & 171r		0,695'	750 82	7960'	
¥.	TEST DATA AND REQUEST FOOIL WELL	OR ALLOWABL	E (Test must be a able for this de		of total volume of load full 24 hours)	oil and must be equal	to or exceed top allow.	
	Date First New Oil Run To Tanks			Producing Method (Flow, pump, gas lift,		s lift, etc.)	i, etc.)	
	Length of Teat	Tubing Pressure		Casing Pr	912686	Choke Size	Poster 3	
							JD 18	
	Actual Prod. During Test	Cil-Bbls.		Water-Bbi	*.	Gas-MCF	11-21-78 PG	
,							- J. #*	
[GAS WELL. Actual Proc. Test-MCF/D	Langth of Test		Bbla. Cen	lensate/NMCF	Gravity of Cend	enacte	
	2240 Teoling Mothed (pitet, back pr.)	24 ho	urs		newe (shat-in)	Choke Sixe	T	
	Back Pressure	Tubing Freesure (2729 #	= = = = = = = = = = = = = = = = = = =	Cosing Fre	•	Adjustal	ile.	
٦.	CERTIFICATE OF COMPLIANC					VATION COMMI		
	I haraby contifue that the rules and re	amulations of the	Oil Conservation	APPRO	VED JUL	1 9 1978		
I hereby certify that the rules and regulations of the Oil Conservation Communion have been complied with and that the information given above is true and complete to the best of my knowledge and belief. (Signature)			W. W. Gressett					
			1	TITLE SUPERVISOR, DISTRICT II				
			This form is to be filed in compliance with MULE 1104.					
			If this is a request for allowable for a nawly drilled or despensivell, this form must be accompanied by a tabulation of the deviation touts taken on the well in accordance with figure 111. All sections of this form must be filled out completely for allow					
(Signature)) (Area Engineer								
-	(Title		Buch - America (Michigana) (America proprieta) - America (America)	li able on	hav kad recomplated	wolla.		
6-22-78 (Date)			well nam	Fill out only Sections I. E. III, and VI for changes of condition well name or number, or transporter, or other such change of condition				
			Separate Forms C-106 must be filed for each pool in multiple completed wells.					