

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

DEC 2 1981

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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LAND OFFICE	
TRANSPORTER	1
OIL	1
GAS	1
OPERATOR	1
PRODUCTION OFFICE	1
Operator	

Gulf Oil Corporation

Address
P. O. Box 670, Hobbs, NM 88240

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)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Eddy "GZ" State Com	Well No. 1	Pool Name, including Formation Angell Ranch stoka Morrow	Kind of Lease State, Federal or Fee State	Lease No. L-4222
Location Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>12</u> Township <u>19S</u> Range <u>27E</u> , NMPM, <u>Eddy</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, TX 79999					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 12	Twp. 19S	Rge. 27E	Is gas actually connected? yes	When 12-14-81 2-13-79

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		X			X			XX
Date 8-28-81 11-20-81	Date Compl. Ready to Prod. 11-27-81		Total Depth 10,957'		P.B.T.D. 10,530'			
Elevations (DF, RKB, RT, GR, etc.) 3521' GL	Name of Producing Formation Morrow		Top Oil/Gas Pay 10,322'		Tubing Depth 10,265'			
Perforations 10,322'-10,464'					Depth Casing Shoe --			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
No New Casing 17 1/2	13 3/4" 48"	474	675 5x Circ.
12 1/4	8 5/8" 24	2500	1000 " "
7 7/8"	5 1/2" 17. + 15.5	10927	600 " TOC 8580
	2 3/8"	10265	

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 Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 425	Length of Test 10 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (prior, back pr.) Flow	Tubing Pressure (XXXXXX) 1650#	Casing Pressure (Shot-in) 0#	Choke Size 20/64"

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

RDPite
(Signature)

Area Engineer
(Title)

11-30-81
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 2 8 1981, 19

BY W. G. Gussitt

TITLE SUPERVISOR, DISTRICT 4

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.