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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-105
Effective 1-1-65

RECEIVED

JUN 19 1978

O. C. C.
ARTESIA, OFFICE

I. OPERATOR
GULF OIL CORPORATION
Address
P. O. Box 670, Hobbs, New Mexico 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Potts Federal	Well No. 1	Pool Name including Formation Undesignated Morrow	Kind of Lease State, Federal or Fee Federal	Lease No. NM-1341
Location Unit Letter <u>0</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>13</u> Township <u>20-S</u> Range <u>27-E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	P. O. Box 1384, Jal, New Mexico 88252	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge.
		Is gas actually connected? <u>No</u> <u>Yes</u> When <u>6-19-78</u>

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'n.	Diff. Res.
		X	X					
Date Spudded 11-15-77	Date Compl. Ready to Prod. 1-8-78		Total Depth 11,407'		P.B.T.D. 11,366'			
Elevations (DF, RKB, RT, CR, etc.) 3333' GL	Name of Producing Formation Morrow		Top Oil/Gas Pay 10,914'		Tubing Depth 10,848'			
Perforations 10,914' - 11,129'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8" - 48# & 68#		420'		420 sx - Circ			
12-1/4"	9-5/8" - 36#		2,800'		1300 sx - Circ			
8-3/4"	5-1/2" 17#		11,407'		1000 sx - TSITOC 881			

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	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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
2141	24 Hours	-	-
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	2930#		Adj

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.

N. B. Sikes, Jr.
(Signature)

Area Engineer

(Title)

6-16-78

(Date)

OIL CONSERVATION COMMISSION

JUN 23 1978

APPROVED _____, 19

BY W. A. Gressett

TITLE SUPERVISOR, DISTRICT II

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 deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multi-completed wells.