

DISTRIBUTION
 SANTA FE
 FILE
 U.S.G.S.
 LAND OFFICE
 TRANSPORTER OIL GAS
 OPERATOR
 PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
 REQUEST FOR ALLOWABLE
 AND
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
 Superseding O-101 and O-110
 Effective 1-1-85

Operator Gulf Oil Corp.
 Address P.O. Box 670, Hobbs, NM 88240

Reason(s) for filing (check proper box) Other (Please explain)
 New Well Change in Transporter of:
 Completion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate New Well

Change of ownership give name and address of previous owner _____
CASINGHEAD GAS MUST NOT BE FLARED AFTER 2/1/85 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.

DESCRIPTION OF WELL AND LEASE:
 Lease Name H.T. Mattern (OCT-B) Well No. 23 Pool Name, including Formation Drinkard Kind of Lease Fee Lease No. _____
 Location Unit Letter G; 1650 Feet From The North Line and 1650 Feet From The East Line
 Line of Section 31 Township 21S Range 37E N.M.P.M. Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Name of Authorized Transporter of Oil or Condensate
Julias New Mexico Pipeline Address (Give address to which approved copy of this form is to be sent) Box 2528, Hobbs, NM 88240
 Name of Authorized Transporter of Casinghead Gas or Dry Gas
Warren Petroleum Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, OK 74100
 Well produces oil or liquids, give location of tanks. Unit G Sec. 31 Twp. 21S Rge. 37E Is gas actually connected? No When _____

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	Some Rest'n.	Full Rest'n.
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.S.T.D.			
<u>1-23-85</u>	<u>2-25-85</u>		<u>6824'</u>		<u>6780'</u>			
Locations (DF, RKD, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
<u>3485' GL</u>	<u>Drinkard</u>		<u>6570'</u>		<u>6544'</u>			
Perforations					Depth Casing Shoe			
<u>6570'-6638'</u>					-			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>14 3/4"</u>	<u>11 3/4"</u>	<u>398'</u>	<u>275</u>
<u>11"</u>	<u>8 5/8"</u>	<u>2720'</u>	<u>750</u>
<u>7 7/8"</u>	<u>5 1/2"</u>	<u>6823'</u>	<u>1200</u>

TEST DATA AND REQUEST FOR ALLOWABLE (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.)	
<u>2-25-85</u>	<u>3-11-85</u>	<u>pump</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
<u>24 hrs</u>	<u>70#</u>	<u>70#</u>	<u>W.O.</u>
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
<u>275</u>	<u>65</u>	<u>210</u>	<u>117</u>

AS WELL,

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Sealing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.
RDPite
 (Signature)
AREA ENGINEER
 (Title)
3-12-85
 (Date)

OIL CONSERVATION COMMISSION
 APPROVED MAR 14 1985, 19____
 BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR
 TITLE _____
 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 logs 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 conditions.

RECEIVED

MAR 18 1985

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