

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

Form C-104
Supersedes Old C-101 and C-11
Effective 1-1-65

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

Operator
Gulf Oil Corp.

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)

New Well

change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name <u>M.A. Ramsay (WCTD)</u>	Well No. <u>5</u>	Pool Name, Including Formation <u>Dollarhide Subb Drinkard</u>	Kind of Lease <u>State, Federal or Fee</u>	Lease No. <u>15782-C</u>
Location <u>K</u>	<u>1650</u>	Feet From The <u>South</u> Line and <u>1650</u>	Feet From The <u>West</u>	
Line of Section <u>28</u>	Township <u>24S</u>	Range <u>38E</u>	N.M.P.M. <u>Lea</u>	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ <u>Permian Corp.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 3119, Midland, TX 79701</u>					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ <u>El Paso Natural Gas Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 1492, El Paso, TX 79999</u>					
Is well produces oil or liquids, give location of tanks.	Unit <u>L</u>	Soc. <u>28</u>	Twp. <u>24S</u>	Rge. <u>38E</u>	Is gas actually connected? <u>Yes</u>	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	Same Restv. Diff. Restv.
Date Spudded <u>10-6-84</u>	Date Compl. Ready to Prod. <u>11-28-84</u>	Total Depth <u>6950'</u>	P.D.T.D.				
Elevations (DF, RKB, RT, GR, etc.) <u>3206.6' GL -</u>	Name of Producing Formation <u>Drinkard</u>	Top Oil/Gas Pay <u>6688'</u>	Taking Depth <u>6784'</u>				
Perforations <u>6688'-6737'</u>			Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12 1/4"</u>	<u>9 5/8"</u>	<u>1345'</u>	<u>575</u>
<u>7 7/8"</u>	<u>5 1/2"</u>	<u>6230'</u>	<u>2450</u>

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 <u>11-28-84</u>	Date of Test <u>12-27-84</u>	Producing Method (Flow, pump, gas lift, etc.) <u>pump</u>	
Length of Test <u>24 hrs</u>	Tubing Pressure <u>30</u>	Casing Pressure <u>30</u>	Choke Size <u>W.O.</u>
Actual Prod. During Test <u>154</u>	Oil - Bbls. <u>124</u>	Water - Bbls. <u>30</u>	Gas - MCF <u>68</u>

GAS WELL

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

CERTIFICATE OF COMPLIANCE

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.

Paul L. Howard
(Signature)
AREA ENGINEER
(Title)
12-31-84
(Date)

OIL CONSERVATION COMMISSION

JAN 2 2 1985

APPROVED _____, 19 _____

BY ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I 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 condition.