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

SANTA FE	NEW MEXICO OIL	NEW MEXICO OIL CONSERVATION COMMISSION Form C-104			
FILE	REQUEST HOBBS DOWARD 5. C. C. Supersedes Old C-104 and Effective 1-1-65				
U.S.G.S.	AND AUTHORIZATION TO TRAMPORT OIL AND NATURAL GAS				
LAND OFFICE	AUTHORIZATION TO TR	COMP OF PITS PHARTON	L GAS		
OIL		6 ,			
TRANSPORTER GAS					
OPERATOR					
PRORATION OFFICE	7				
Operator					
Gulf Oil Corpora	Elon Elon				
Address					
P.O. Box 98; And	······				
Reason(s) for filing (Check proper be	ox)				
New Well	Change in Transporter of:				
Recompletion	Oil Dry Gas				
Change in Ownership	Casinghead Gas Cond	densate			
If change of ownership give name	2004				
and address of previous owner					
	4 ° 1.1 12.	1. / P/			
I. DESCRIPTION OF WELL ANI	Well No. Pool Name, Including	Formation 0 - 2010 Kind of L	ease Lease No.		
Loa "RP" State	1 Berth Barley	State, Fe	deral or Fee State E-1001		
Location			3988		
B 66) Marth	1 cAn	Wash		
Unit Letter;;	Feet From The	ine andFeet Fi	rom The		
Line of Section 15	Cownship 11-8 Range	33- 8 , NMPM,	Loa County		
Line of Section T	ownship — Mange	J. Trivia ivij			
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL O	SAS			
Name of Authorized Transporter of C	or Condensate	Aidress (Give address to which a	pproved copy of this form is to be sent)		
	_	P.O. Ber 1725; Mal	RT Trucks		
Name of Authorized Transporter of C	Casinghead Gas or Dry Gas	Address (Give address to which a	oproved copy of this form is to be sent)		
		725 Gulf Bldg.; Mid	ent. Terrae		
re la	Unit Sec. Twp. Rge.	Is gas actually connected?	When		
If well produces oil or liquids, give location of tanks.	B 15 11-8 33-	R No	Soon as possible		
If this production is commingled to	with that from any other lease or poo	d give commingling order number:			
V. COMPLETION DATA	with that from any other reads of pos	-, 6			
	Oil Well Gas Well	New Well Workover Deeper	Plug Back Same Restv. Diff. Restv		
Designate Type of Complete		X			
Date Spudded	Date Compl. Ready to Prod. 5-23-67	Total Depth	P.B.T.D.		
		10,2601	19,172'		
Elevations (DF, RKB, RT, GR, etc.	l	Top Oil/Gas Pay	Tubing Depth		
4258' Qr.	Lover Penn	10,045	10,035'		
Perforations	, 10124-26' and 10136-38	t (a man)	Depth Casing Shoe		
200[2-[4] 20090-30			10,200		
		ND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
17 1/2"	13 3/8" OD	375	350 Sx - Circulated		
	5 5/5" 00 rt behind \$ 5/8" 00 cests	3000' mg at 2185' as per temp			
7 7/8" Top sense	t behind \$ 5/8" OD cesi:	ag at 2105' as per tem	000 8x		
<u> </u>		20,000			
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be able for this	e after recovery of total volume of load depth or be for full 24 hours)	loil and must be equal to or exceed top allou		
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, g	as lift, etc.)		
5-24-67	6-4-67	Flow			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
24 hours	425 peig	Packer	24/64"		
Actual Prod. During Test	Oil-Bbls.	Water - Bbis.	Gas - MCF		
332 25	184	148	971		
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
,	-		50-60 at 60°F.		
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size		
1,500,000		•			
U CERTIFICATE OF COMPLIA	NOE	OIL CONSE	RVATION COMMISSION		

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.

(Signature)

(Title)

(Date)

JUN 2 1967 APPROVED ORIGE TITLE SIGNED IS

This form it 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.