

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-110
Effective 1-1-65

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G.S.		
D OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator
Gulf Oil Corporation
Address
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)
completed in undesignated Strawn

If change of ownership give name
and address of previous owner

THIS WELL MAY BE PLACED IN THE POOL
OF THE LEASE-OWN. IF YOU DO NOT CONCUR
RETURN TO OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hulda Townsend	Well No. 2	Pool Name, including Formation Undesignated Strawn	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter I : 2310 Feet From The South Line and 660 Feet From The East Line of Section 9 Township 16-S Range 35-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Western Crude Oil Co., Inc.	Address (Give address to which approved copy of this form is to be sent) Box 1142, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> None - Gas is vented, waiting on tank battery construction	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 9
	Twp. 16-S	Rge. 35-E
	Is gas actually connected? No	
	When	

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen <input checked="" type="checkbox"/>	Plug Back	Same Res'v.	Diff. Res'v.
Date Recompleted 5-8-74	Date Compl. Ready to Prod. 5-8-74	Total Depth 11,919'	P.B.T.D. 11,569'					
Elevations (DF, RKB, RT, GR, etc.) 4009' GL	Name of Producing Formation Strawn	Top Oil/Gas Pay 11,374'	Tubing Depth 11,390'					
Perforations 11,374' to 11,390'			Depth Casing Shoe 11,919'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	374'	375 sacks (Circulated)
11"	8-5/8"	4599'	2650 sacks (Circulated)
7-7/8"	5-1/2"	10,533'	150 sacks (TOC at 10,060')
4-3/4"	4"	Top at 9983' set at 11,919'	150 sacks (TOC at 9983')

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

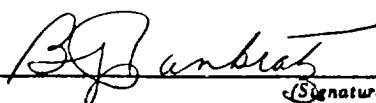
Date First New Oil Run To Tanks 5-8-74	Date of Test 5-9-74	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 300#	Casing Pressure --	Choke Size 3/4"
Actual Prod. During Test 479 barrels	Oil-Bbls. 426	Water-Bbls. 53 (Load Water)	Gas-MCF 1050

GAS WELL

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

I. 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.


Area Engineer
May 9, 1974

OIL CONSERVATION COMMISSION

APPROVED
BY
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 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.