| NO. OF COPIES RECEIVED | | | |
|------------------------|-----|--|--|
| DISTRIBUTION | | | |
| SANTA FE | | | |
| FILE | | | |
| U.S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |
| PRORATION OFFICE | | | |
| | | | |

11

Ш

IV

| | DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE I RANSPORTER GAS OPERATOR PRORATION OFFICE | REQUEST F | PONSERVATION COMMISSION FOR ALLOWABLE AND TO THE TOTAL CO. NSPORT OIL AND NATURAL GOOD TEST TO THE TOTAL STATE OF THE TOTAL STA | Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AS |
|---|--|--|--|---|
| 1. | Operator Gulf Oil Corperation | 1 | | |
| | Box 670, Hobbs, N.M | | | |
| | Reason(s) for filing (Check proper box. | | Other (Please explain) | |
| | Recompletion | Cil Dry Gas | Thence in Themenor | ter, effective 3-1-67 |
| | If change of ownership give name | Casinghead Gas Condens | sate | da, da |
| | and address of previous owner | | | |
| 11. | Lease Name | Well No.: Pool Name, Including Fo | | _ |
| | Lea MEMIN State | 1 Midway Abo | state, reservi | E-8237 |
| | Unit Letter 0; 660 | Feet From The south time | e and 1980 Feet From T | he east |
| | Line of Section 9 Tov | vnship 178 Range 3 | 37E , NMPM, Lea | County |
| 11. | DESIGNATION OF TRANSPORT | CER OF OIL AND NATURAL GAS | <u>s</u> | |
| | Name of Authorized Transporter of Oil The Permian Corpera | or Condensate | Address Give address to which approx Box 3119, Midland, Te | |
| | Name of Authorized Transporter of Cas | | Address (Give address to which approved Box 1135, Funice, New | |
| | If well produces oil or liquids, | Unit Sec. Twp. Ege. | is gas actually connected? What | |
| | give location of tanks. | 0 9 17S 37E | yes | 1-31-64 |
| | If this production is commingled wire COMPLETION DATA | th that from any other lease or pool, g | New We.: Workover Despen | Flug Back Same Resty. Diff. Resty. |
| | Designate Type of Completic | | New West | ; |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | ÷ .3.T.D. |
| | Elevations (DF, RKB, RT, GR, etc., | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| | Perforations | | | Crepth Casing Shoe |
| | | TUDING CASING AND | CEMENTING RECORD | i i |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | | |
| | | | | |
| v | TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be af | | and must be equal to or exceed top allow- |
| ٠. | OIL WELL Date First New Cil Run To Tanks | able for this dep | pth or be for full 24 hours) Producing Method (Flow, pump, gas lif | |
| | Date First New Oil Hall To Talle | | | Choke Size |
| | Length of Test | Tubing Pressure | Casing Pressure | EB 1 357 |
| | Actual Prod. During Test | Oil-Bbis. | Water - Bbis. | Gas MOTE CON. COM. |
| | | | | DIST. 3 |
| | GAS WELL Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| | | | | Challe Circ |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| VI. | CERTIFICATE OF COMPLIAN | CE | OIL CONSERVA | TION COMMISSION |
| I hereby certify that the rules and regulations of the Oil Conservation | | APPROVED | , 19 | |
| | Commission have been complied ' | with and that the information given best of my knowledge and belief. | BY | |
| | above to time and complete to the | | TITLE | |

VI

2-24-67

| | OMGMALU O Distri | |
|------|--------------------------------|--|
| Area | (Signature) Production Manager | |
| 2.21 | (Title) | |

(Date)

| APPROVED | , 19 |
|----------|------|
| Y | |
| 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.

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