

DUPLICATE

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
(Revised 7/1/52)

REQUEST FOR (OIL) - (GAS) ALLOWABLE

☒ New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

July 29, 1955

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Gulf Oil Corporation

Lea State "DA"

Well No. **3**

in **SE**

1/4

NW

1/4

Company or Operator:

(Lease)

P

Sec. **14**

T. **19-S**

R. **36-E**

NMPM,

Eumont (Oil)

Pool

Unit

Lea

County. Date Spudded **7-3-55**

Date Completed **7-17-55**

Please indicate location:

	•		

Elevation **3743'** Total Depth **4050'** P.B. **-**

Top oil/gas pay **3939'** Name of Prod. Form **Queen**

Casing Perforations: _____ or

Depth to Casing shoe of Prod. String **303 3939'**

Natural Prod. Test _____ BOPD

based on _____ bbls. Oil in _____ Hrs. _____ Mins.

Test after acid or shot **86** BOPD

Based on **50** bbls. Oil in **14** Hrs. **-** Mins.

Gas Well Potential _____

Size choke in inches **13/64"**

Date first oil run to tanks or gas to Transmission system: **7-28-55**

Transporter taking Oil or Gas: **Gulf Oil Corp., Grade Oil Purch. Dept.**

Casing and Cementing Record

Size Feet Sax

9-5/8"	325'	275
7"	3926'	1550

Remarks: **It is requested that this well be placed in the Proration Schedule effective July 28, 1955.**

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved **AUG 2 1955**, 19 _____

Gulf Oil Corporation

(Company or Operator)

OIL CONSERVATION COMMISSION

By: **B. F. Jones**

(Signature)

By: **W. H. H. H. H. H.**

Title **Area Supt. of Prod.**

Send Communications regarding well to:

Title _____

Name **Gulf Oil Corporation**

Address **Box 2167, Hobbs, N. M.**