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| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

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

I. Operator
Gulf Oil Corporation

Address
P. O. Box 670, Hobbs, N.M. 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)
**Abandon Monument Hlinebry Pool and
recomplete in Momment Pool**

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|-----------------------|---|---|-------------------------|
| Lease Name G. C. Matthews | Well No. 12 | Pool Name, Including Formation Monument Grayburg San Andres | Kind of Lease State, Federal or Fee Fee | Lease No. --- |
| Location Unit Letter P ; 330 Feet From The south Line and 990 Feet From The east Line of Section 6 Township 20S Range 37E , 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"/> Shell Pipeline Corporation | Address (Give address to which approved copy of this form is to be sent) Box 1910, Midland, Texas | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation | Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit I | Sec. 6 | Twp. 20S | Rge. 37E | Is gas actually connected? Yes | When 11-11-70 |

If this production is commingled with that from any other lease or pool, give commingling order number: **PC-142**

IV. COMPLETION DATA

| | | | | | | | | |
|--|---|---|------------------------------|--------------|--------|-------------------------------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| | X | | | X | | X | | X |
| Date xxxx recompleted 11-10-70 | Date Compl. Ready to Prod. 11-11-70 | Total Depth 5700' PB 3697' | P.B.T.D. 5400' | | | | | |
| Elevations (DF, RKB, RT, CR, etc.) 3556' DF | Name of Producing Formation Grayburg San Andres | Top Oil/ xxx Pay 3722' | Tubing Depth 3674' | | | | | |
| Perforations 3722 - 3727' with 8, 1/2" jet holes | | | | | | Depth Casing Shoe - | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | | |
| 18" | 13-3/8" | 408' | | 400 | | | | |
| 12-1/4" | 9-5/8" | 2899' | | 1725 | | | | |
| 8-3/4" | 7" | 5699' | | 500 | | | | |
| | 2-3/8" | 3674' | | --- | | | | |

V. 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 11-11-70 | Date of Test 11-11-70 | Producing Method (Flow, pump, gas lift, etc.) Flow | |
| Length of Test 24 hours | Tubing Pressure 300# | Casing Pressure - | Choke Size 18/64" |
| Actual Prod. During Test 157 | Oil - Bbls. 97 | Water - Bbls. 60 | Gas - MCF --- |

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 |

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.

Original signed by C. F. Kaltayer
(Signature)

Area Petroleum Engineer
(Title)

11-12-70
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
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.
Previous Form C-104 must be filed for each pool in multiple

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OIL CONSERVATION COMM.
HOBBBS, N. H.