

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form OC-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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

I.

Operator PAN AMERICAN PETROLEUM CORPORATION	NAME CHANGED: FROM: PAN AMERICAN PETR. CORP. TO: AMCCO PRODUCTION CO. EFFECTIVE: 2-1-71
Address BOX 68, HOBBS, N. M. 88240	Other (Please explain) FILED IN COMPLIANCE W/ FORMER TRANSPORTER'S REQUEST (SHELL PIPE LINE CORP), WELL PRODUCES ALL GAS.
Reason(s) for filing (Check proper box) New Well ☐ Recompletion ☐ Change in Ownership ☐	CANCEL Transporter of: Oil ☐ Casinghead Gas ☐ Dry Gas ☒ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lessee Name GULLULY "B" FED RRA	Well No. 4	Pool Name, Including Formation MONUMENT (GSA)	Kind of Lease State, Federal or Fee FED	Lease No. LC-031736(6)
Location Unit Letter D	340	Feet From The NORTH	Line and 340	Feet From The WEST
Line of Section 22	Township 20-S	Range 37-E	N.M.P.M. LEA	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
PHILLIPS PETROLEUM CORP. If well produces oil or liquids, give location of tanks.	EFFECTIVE: February 1, 1992 GPM Gas Corporation Unit Sec. PHILLIPS BLVD. ODESSA, TEXAS

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (OF, RRB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puls, 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.

(Signature)

AREA SUPERINTENDENT

(Title)

OCT 10 1968

(Date)

OIL CONSERVATION COMMISSION

APPROVED OC 10 1968, 19

BY [Signature]

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.

Signature Form, OC-104, must be filed for each well in compliance