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TRANSPORTER	OIL
	GAS
REGISTRATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) ~~AND GAS~~ ALLOWABLE

~~RECOMPLETION~~
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-401 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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, N.M.

8-28-61

(Place)

(Date)

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

Gulf Oil Corporation

Bunice King

, Well No. 19, in NE $\frac{1}{4}$ NW $\frac{1}{4}$,

(Company or Operator)

(Lease)

C

28

T 21S

R 37E

NMPM.

Elmhurst Oil

Pool

Unit Letter

Lee

Recompleted (DC)

Date 8-10-61

8-10-61

County. Date Spudded

Elevation 3466

Total Depth 6990

PBTD

Top Oil Gas Pay 5803'

Name of Prod. Form. Elmhurst Oil

PRODUCING INTERVAL -

Perforations 5856', 5820', 5803'

Open Hole

Depth

Casing Shoe

Depth

Tubing

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. Size _____ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 185 bbls. oil, 6 bbls acid residue bbls. water in 24 hrs, _____ min. Size 22/64" Choke

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand) 750 gals. 15% NEA; 18,000 gals. 24 grty ref oil w/1/40# Alomite/gal

Casing _____ Tubing 5200 Date first new

Press. _____ Press. 4700 oil run to tanks 8-15-61 & 3# SPG

Oil Transporter Gulf Oil Corp., Grude Oil Purchasing Dept., Trucks

Gas Transporter _____

Tubing, Casing and Cementing Record

Size

Feet

Sax

13-3/8	297	300
8-5/8"	2800'	1300'
7"q	7834'	700
5 1/2" liner	160'	18
2-3/8"	5804'	-

Remarks: DC w/Paddock - Order MC-1086

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

Approved _____, 19 _____

Gulf Oil Corporation

(Company or Operator)

By: _____

(Signature)

OIL CONSERVATION COMMISSION

Title _____

Area Production Manager

Send Communications regarding well to:

Name _____

Gulf Oil Corp.

Address _____

Box 2167, Hobbs, N.M.