

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

Superseded by  
Effective 1-1-65

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

Operator <b>Gulf Oil Corporation</b>	
Address <b>Box 670, Hobbs, New Mexico 88240</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	<b>New Well</b>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Central Drinkard Unit</b>	Well No. <b>142</b>	Pool Name, including Formation <b>Brinkard</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No.
Location				
Unit Letter <b>F</b>	<b>1980</b>	Feet From The <b>North</b>	Line and <b>1980</b>	Feet From The <b>West</b>
Line of Section <b>33</b>	Township <b>21-S</b>	Range <b>37-E</b>	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"/> <b>Texas New Mexico Pipeline Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1510, Midland, Texas 79701</b>			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Warren Petroleum Corporation</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1589, Tulsa, Oklahoma 74100</b>			
<b>Skelly Oil Company</b>	Unit	Sec.	Twp.	Rge.
If well produces oil or liquids, give location of tanks.	<b>E</b>	<b>33</b>	<b>21-S</b>	<b>37-E</b>
				<b>Yes</b>
				<b>1-3-73</b>

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

**EFFECTIVE JANUARY 31, 1977,  
SKELLY OIL COMPANY MERGED  
INTO GETTY OIL COMPANY.**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen
<b>Recompleted</b>	<b>XX</b>				
Date <del>xxxxx</del> <b>1-3-73</b>	Date Compl. Ready to Prod. <b>1-3-73</b>	Total Depth <b>6615'</b>	P.B.T.D. <b>6602'</b>		
Elevations (DF, RKB, RT, GR, etc.) <b>3464' GL</b>	Name of Producing Formation <b>Drinkard</b>	Top Oil/Gas Pay <b>6514'</b>	Tubing Depth <b>6566'</b>		
Perforations <b>6514' to 6601'</b>		Depth Casing Shoe <b>6615'</b>			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<b>12-1/4"</b>	<b>9-5/8"</b>	<b>1192'</b>	<b>325 sacks (Circulated)</b>
<b>8-3/4"</b>	<b>7"</b>	<b>3620'</b>	<b>275 sacks (TOC at 1608')</b>
<b>6-1/4"</b>	<b>5"</b>	<b>6615'</b>	<b>275 sacks (TOC at 4000')</b>
	<b>2-3/8"</b>	<b>6566'</b>	

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 <b>1-3-73</b>	Date of Test <b>1-3-73</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pump</b>	
Length of Test <b>22 hours</b>	Tubing Pressure <b>--</b>	Casing Pressure <b>--</b>	Choke Size <b>2"</b>
Actual Prod. During Test <b>22 barrels</b>	Oil-Bbls. <b>22</b>	Water-Bbls. <b>0</b>	Gas-MCF <b>--</b>

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.

**H. J. Beysale**  
(Signature)  
**Area Engineer**  
(Title)  
**January 5, 1972**  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED **[Signature]** 19 **72**  
BY **[Signature]**  
TITLE **SUPERVISOR DISTRICT I**

This form is to be filed in compliance with RULE 111.  
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.