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|------------------|-----|----|--|
| DISTRIBUTION | | | |
| SALE | TA | FE | |
| FILE | | | |
| NO. 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
Box 670, Hobbs, New Mexico 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)
New Well

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|-----------------------|---|---|-----------|
| Lease Name H. T. Mattern (NCT-B) | Well No. 20 | Pool Name, Including Formation Drinkard | Kind of Lease State, Federal or Fee Fee | Lease No. |
| Location Unit Letter F ; 1980 Feet From The North Line and 1961 Feet From The West Line of Section 31 Township 21-S Range 37-E , 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"/> Texas-New Mexico Pipeline Company | Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701 | | | | | |
| 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 74100 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit P | Sec. 30 | Twp. 21-S | Rge. 37-E | Is gas actually connected? Yes | When 10-30-75 |

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 Res'v. | Diff. Res'v. |
| Date Spudded 10-6-75 | Date Compl. Ready to Prod. 10-23-75 | Total Depth 6790' | | P.B.T.D. 6751' | | | | | |
| Elevations (DF, RKB, RT, CR, etc.) 3486' GL | Name of Producing Formation Drinkard | Top Oil/Gas Pay 6496' | | Tubing Depth 6479' | | | | | |
| Perforations 6496-6696' | Depth Casing Shoe 6789' | | | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | |
| 11" | 8-5/8" | | 1210' | | 500 sacks (Circulated) | | | | |
| 7-7/8" | 5-1/2" | | 6789' | | 700 sacks (TOC at 2289') | | | | |
| | 2-3/8" | | 6479' | | | | | | |

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 10-23-75 | Date of Test 11-1-75 | Producing Method (Flow, pump, gas lift, etc.) Flowing | |
| Length of Test 24 hours | Tubing Pressure 725# | Casing Pressure -- | Choke Size 14/64" |
| Actual Prod. During Test 232 barrels | Oil-Bbls. 170 | Water-Bbls. 62 | Gas-MCF -- |

GAS WELL

Corrected Gravity 37.6

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| 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.

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Jerry Lipton
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.

D. F. Berlin

(Signature)

Area Engineer

(Title)

November 3, 1975

(Date)