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DISTRIBUTION	3	ONSERVATION COMMISSION	Porm C-104
SANTA FE	REQUEST	FOR ALLOWABLE	Supergedes Old C-104 and C-116 Effective 1-1-65
FILE		AND	
LAND OFFICE	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GAS
OIL			
FRANSPORTER GAS OPERATOR			
PRORATION OFFICE			
Gulf Oil Corporation			
Box 670, Hobbs, N.M. 8	8240		
Reason(s) for filing (Check proper box		Other (Please explain)	
New Well	Change in Transporter of:	New We	ell
Recompletion	Oil Dry Ga		
Change in Ownership	Casinghead Gas Conden	sage []	
f change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND Lease Name	LEASE Well No. Pool Name, Including Fo	ormation Kind of Leas	se Lease No.
Central Drinkard Unit	412 Drinkard	State, Federa	ol or Fee Fee
	70 Feet From The north Lin	e and 270 Feet From	The east
Line of Section 29 Tox	waship 21S Range 37	E , NMPM, Lea	County
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S	
Name of Authorized Transporter of Oil Shell Pipe Line Corpor		Address (Give address to which appro Box 1910, Midland, Te	į
Name of Authorized Transporter of Car		Address (Give address to which appre	!
Warren Petroleum Corpo		Box 1589, Tulsa, Okla	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. J 29 215 37E	Is gas actually connected? Wi	4-27-76
If this production is commingled wi	th that from any other lease or pool,	give commingling order number:	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
Designate Type of Completic	i	X	
Date Spudded	Date Compl. Ready to Fred.	Total Depth	P.B.T.D.
2-5-76 Elevations (DF, RKB, RT, GR, etc.)	3-10-76 Name of Producing Formation	6546 9 Top XX /Gas Pay	6538 Tubing Depth
3482 • GL	Drinkard	64381	64731
Perforations		·	Depth Casing Shoe
6438° to 6485°			65451
		CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
1111	8-5/811	1252	500 sx (circulated)
7-7/8 ^{tt}	5-1/2 ¹¹ 2-3/8 ¹¹	6545 **	82) SX (CIFCUIA-GQ)
	27.0	*DV tool at 1150	
TEST DATA AND REQUEST F		fter recovery of total volume of load oil pth or be for full 24 hours)	l and must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
			<u> </u>
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
905 Testing Method (pitot, back pr.)	24 hours Tubing Pressure (Ebut-in)	Casing Pressure (Shut-in)	Choke Size
Back Pressure	350# (flowing)	-	2 orifice
CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION
		APPROVED 1	19
Commission have been compiled to	regulations of the Oil Conservation with end that the information given	Lister C	See the
above is true and complete to the	s best of my knowledge and belief.	BY ARTES	
		TITLE	SUR DISCHOOL SURFINE

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D. F. Berlin

Area Engineer (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 sllow-sole or new and recompleted wells.

File out tonly Maritime 1, 11, 18, and V_I for change of content, while the many type of the content of content.