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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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-1
Effective 1-1-65

I. Operator
Gulf Oil Corporation

Address
P.O. Box 670 Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name W. A. Ramsay (NCT-A)	Well No. 13	Pool Name, Including Formation Eumont Gas	Kind of Lease State, Federal or Fee State	Lease No. B-1732
Location Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line of Section 35 Township 21-S Range 36-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910, Midland, Texas 79701	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Northern Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 308, Omaha, Nebraska 68101	
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 35
	Twp. 21-S	Rge. 36-E
	is gas actually connected? No	

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 ² v.	Diff. Res ² v.
		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Date Sealed Recompleted 10-7-78	Date Compl. Ready to Prod. 10-7-78		Total Depth 3845'		P.B.T.D. 3720'			
Elevations (DF, RKB, RT, GR, etc.) 3548' DF	Name of Producing Formation Queen		Top Oil/Gas Pay 3555'		Tubing Depth 3456'			
Perforations 3555' - 3672'					Depth Casing Shoe --			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13"	9-5/8" - 25.7#		293'		240 - Circ			
7-7/8"	5-1/2" - 14 #		3741'		150 - TOG @ 2791'			
	2-3/8"		3456'					

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 1686	Length of Test 24 hrs.	Bbls. Condensate/MCF 3	Gravity of Condensate 48.4° API
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 130#	Casing Pressure (shut-in) --	Choke Size 20/64"

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.

A. P. Sklar Jr.
(Signature)

Area Engineer

(Title)

10-31-78

(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAY 23 1979**, 19

BY *[Signature]*
TITLE **SUPERVISOR DISTRICT I**

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 all wells 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 multi-completed wells.

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NOV 1 1978

OIL CONSERVATION COMM.
ROBERT, R. M.