| 40 or            | Lieku | ı       | i |
|------------------|-------|---------|---|
| DISTRIBUTION     |       |         |   |
| SANTA FE         |       |         |   |
| FILE             |       |         |   |
| U.S.G.S.         |       |         |   |
| LAND OFFICE      |       | <u></u> |   |
| TRANSPORTER      | OIL   |         |   |
|                  | GAS   |         |   |
| OPERATOR         |       |         |   |
| PRORATION OFFICE |       |         |   |

|                            | DISTRIBUTION  SANTA FE  FILE   | REQUEST   | ONSERVATION COMMISS<br>FOR ALLOWABLE<br>AND   | Supersedes O<br>Effective 1-1-      | Supersedes Old C-104 and C-110<br>Effective 1-1-65 |  |  |
|----------------------------|--|---|---|-------------------------------------|--|--|--|
|                            | U.S.G.S.  LAND OFFICE  TRANSPORTER  GAS  OPERATOR  | AUTHORIZATION TO TRA  | NSPORT OIL AND NA   | TURAL GAS                           |  |  |  |
| ı.                         | PRORATION OFFICE   |   |   |                                     |  |  |  |
|                            | Gulf Oil Corporation   |   |   |                                     |  |  |  |
|                            | Box 670, Hobbs, New A<br>Reason(s) for filing (Check proper box  | <u>1exico 88240</u>   | Other (Please ex  | plain)                              |  |  |  |
|                            | New We!I  Recompletion  Change in Ownership  | Change in Transporter of:  Oil Dry Ga:  Casinghead Gas Conden | Eumoni. Gas   |                                     |  |  |  |
|                            | If change of ownership give name and address of previous owner   |   |   |                                     |  |  |  |
| II.                        | DESCRIPTION OF WELL AND  | Well No. Pool Name, Including Fo                              |   | nd of Lease                         | Lease No.  |  |  |
|                            | W. A. Ramsay (NCT-A)   | 7   Eumont Gas  |   | State _                             |  |  |  |
|                            | Unit Letter N ; 66   | 60 Feet From The South Lin                                    | e and <u>1980</u>   | Feet From The West                  |  |  |  |
|                            | Line of Section 35 To  | wnship 21-S Range   | 36-Е , ммрм,  | Lea                                 | County   |  |  |
| III.                       | DESIGNATION OF TRANSPOR'   | TER OF OIL AND NATURAL GA                                     | S<br>Address (Give address to u   | hich approved copy of this form is  | to be sent)  |  |  |
|                            | None - Dry gas well Name of Authorized Transporter of Car  | singhead Gas or Dry Gas X                                     | Address (Give address to u  | hich approved copy of this form is  | to be sent)  |  |  |
|                            | Northern Natural Gas   | Company   | Box 308, Omah, Is gas actually connected?   | Nebraska 68101                      |  |  |  |
|                            | If well produces oil or liquids, give location of tanks.   | Unit Sec. Twp. Rge.   | No No   | 1                                   |  |  |  |
|                            | If this production is commingled wi  | th that from any other lease or pool,                         |   | nmber:  Deepen Plug Back Same Re    | stv. Diff. Restv.                                  |  |  |
|                            | Designate Type of Completic  | on – (X)  | ! ! ! !<br>! ! ! !  | XX                                  |  |  |  |
|                            | Date Spenderk  | Date Comp., Ready to Prod.                                    | Total Depth   | P.B.T.D.                            |  |  |  |
|                            | August 15, 1973 Elevations (DF, RKB, RT, GR, etc.)   | 8-15-73 Name of Producing Formation                           | Top Qu/Gas Pay  | Tubing Depth                        |  |  |  |
|                            | 3581 GL  | Queen   | 2912'   | 2897 Depth Casing Shoe              |  |  |  |
|                            | 2912' to 3678'   |   |   | 3785'                               |  |  |  |
|                            |  | <del></del>   | CEMENTING RECORD  | SACKS CE                            | MENT   |  |  |
|                            | HOLE SIZE  | CASING & TUBING SIZE  | 305 *   | Circulated                          |  |  |  |
|                            | 12-1/4"<br>7-7/8"  | 5-1/2"  | 3785'   | 200 sacks (To                       | C at 1800'   |  |  |
|                            | 7-170  | 2-3/8"  | 2897'   |                                     |  |  |  |
| V.                         | TEST DATA AND REQUEST F  | OR ALLOWABLE (Test must be a                                  | fter recovery of total volume   | of load oil and must be equal to or | exceed top allow-                                  |  |  |
| •••                        | OIL WELL Date First New Oil Run To Tanks   | able for this de  | pth or be for full 24 hours) Producing Method (Flow, p  |                                     |  |  |  |
|                            | Length of Test   | Tubing Pressure   | Casing Pressure   | Choke Size                          |  |  |  |
|                            | Actual Prod. During Test   | Oil-Bble.   | Water-Bbls.   | Gas - MCF                           |  |  |  |
|                            |  |   |   |                                     |  |  |  |
|                            | GAS WELL   |   | 1501-0-10-00-00-0   | Gravity of Condensat                |  |  |  |
|                            | Actual Prod. Test-MCF/D  | Length of Test  24 hours                                      | Bbls. Condensate/MMCF   | Gravity di Condensari               |  |  |  |
|                            | 924 Testing Method (pitot, back pr.)   | Tubing Pressure (Shut-in)                                     | Casing Pressure (Shut-is  | }                                   |  |  |  |
|                            | Back pressure  |   | 011 60  | 25/64* NSERVATION COMMISSION        | JN   |  |  |
| VI.                        | CERTIFICATE OF COMPLIAN  | RTIFICATE OF COMPLIANCE                                       |   | NSERVA FIOR COMMISSION              | 19   |  |  |
|                            | 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. |   | APPROVED  |                                     |  |  |  |
|                            |  |   | BY  |                                     |  |  |  |
|                            |  | _   | TITLE   |                                     |  |  |  |
|                            | 2/1 Biono  | alo   | This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or despend |                                     |  |  |  |
| H.J. Belaslate (Signature) |  |   | well, this form must be accompanied by a tabulation of the deviation.   |                                     |  |  |  |
|                            | Area Engineer  |   | All sections of this form must be filled out completely for sllow-<br>able on new and recompleted wells.                  |                                     |  |  |  |
|                            | (Ti  | itle)   | able on new and reco  | tions I, II. III, and VI for ch     | anges of owner.                                    |  |  |

(Date)

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.