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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

JUL 27 6 50 AM '69

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)  
**Abandoned Wants Abe and recompleted in Drinkard**  
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name **Harry Leonard (NCT-F)** Well No. **5** Pool Name, Including Formation **Drinkard** Kind of Lease **State** Lease No. **B-1732**  
Location  
Unit Letter **I** ; **555** Feet From The **South** Line and **555** Feet From The **East**  
Line of Section **2** Township **21-S** Range **37-E** , NMPM, **Lea** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
**Shell Pipe Line Corporation** Address (Give address to which approved copy of this form is to be sent)  
**Box 1910, Midland, Texas**  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
**Warren Petroleum Corporation** Address (Give address to which approved copy of this form is to be sent)  
**Box 1598, Tulsa, Oklahoma**  
If well produces oil or liquids, give location of tanks. Unit **0** Sec. **2** Twp. **21-S** Rge. **37-E** Is gas actually connected? **Yes** When **7-28-69**

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) **XX** Oil Well ☒ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☒ Same Res'v. ☐ Diff. Res'v. ☒  
Date Spudded **--** Date Compl. Ready to Prod. **7-26-69** Total Depth **8013'** P.B.T.D. **6833'**  
Elevations (DF, RKB, RT, GR, etc.) **3482' OL** Name of Producing Formation **Drinkard** Top Oil/Gas Pay **6706'** Tubing Depth **6788'**  
Perforations **6706-08', 6724-26', 6740-42', 6756-58' & 6776-78'** Depth Casing Shoe **8012'**  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
**17-1/4"** **12-3/4"** **287'** **300 sacks (Circulated)**  
**11"** **8-5/8"** **3049'** **1100 sacks (TOC at 1375')**  
**7-7/8"** **5-1/2"** **8012'** **925 sacks (TOC at 3075')**  
**2-3/8"** **6788'**

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 **7-26-69** Date of Test **7-26-69** Producing Method (Flow, pump, gas lift, etc.) **Snub test (Well is now pumping)**  
Length of Test **7 hours** Tubing Pressure **--** Casing Pressure **--** Choke Size **2"**  
Actual Prod. During Test **99** Oil-Bbls. **33** Water-Bbls. **66 (Load water)** Gas-MCF **--**

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.  
ORIGINAL SIGNED BY  
**C. D. BORLAND**  
(Signature)  
**Area Production Manager**  
(Title)  
**July 29, 1969**  
(Date)  
OIL CONSERVATION COMMISSION  
APPROVED **JUL 30 1969**, 19  
BY **John W. Runyan**  
TITLE **Geologist**  
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.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

**NEW XICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

Operator <b>Gulf Oil Corporation</b>			Lease <b>Harry Leonard (NCT-F) 11/69</b>		Well No. <b>5</b>
Unit Letter <b>I</b>	Section <b>2</b>	Township <b>21-S</b>	Range <b>37-E</b>	County <b>Lea</b>	
Actual Footage Location of Well: <b>555</b> feet from the <b>South</b> line and <b>555</b> feet from the <b>East</b> line					
Ground Level Elev. <b>3482'</b>	Producing Formation <b>Drinkard</b>		Pool <b>Drinkard</b>		Dedicated Acreage: <b>40</b> Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

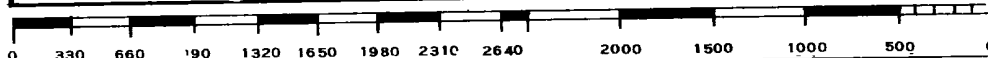
☐ Yes   ☐ No   If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission. **Abandoned Wells Abo and recompleted in Drinkard**


**Long Section**

**0**



**CERTIFICATION**

*I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.*

Name   **ORIGINAL SIGNED BY  
C. D. BORLAND**

Position  
**Area Production Manager**

Company  
**Gulf Oil Corporation**

Date  
**July 29, 1969**

*I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.*

Date Surveyed

Registered Professional Engineer  
and/or Land Surveyor

Certificate No.