Andrew Co.			
NO. OF COPIES NECEIVED			
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	<u> </u>	
OPERATOR		$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	
PRORATION OFFICE		<u> </u>	L

-	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION .	Form C-104
}	SANTA FE	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-110
-	FILE	N_40_0. /	Effective 1-1-65	
-	u.s.g.s.	AUTHORIZATION TO TRAN	S	
-	LAND OFFICE	7,0,1,0,1,2,1,1,0,1,1,2		
	TRANSPORTER OIL			
	OPERATOR GAS			
1	PRORATION OFFICE			
•	Operator			
	Gulf Oil Corporation Address			
	Box 670, Hobbs, New Mex	ico 88240	Other (Please explain)	
Ì	Reason(s) for filing (Check proper box)	Change in Transporter of:		nanortar offoctive
	New We!l	Oil Dry Gas	1 1 1	nsporter, effective
	Recompletion Change in Ownership	Casinghead Gas Condens	1 1 1 •	
ŀ				
	If change of ownership give name and address of previous owner			
	PROPERTY OF WELL AND I	FASE		
н.	DESCRIPTION OF WELL AND L Lease Name	Well No. Pool Name, Including For		Lease No. B-1732
	Harry Leonard (NCT-E)	3 Drinkard	State, Federal o	state State 1732
	Location	North	and 1980 Feet From Th	East
	Unit Letter B : 660	Feet From The North Line	and reet from in	
	Line of Section 16 Tow	nship 21—S Range 3	37-E , NMPM,	Lea County
	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	s	
111.	Name of Authorized Transporter of Oil	or Condensate	Add. ess forte address	i .
	Texas-New Mexico Pipeli	ne Company	Box 1510, Midland, Texa Address (Give address to which approve	d copy of this form is to be sent)
	Name of Authorized Transporter of Cas	inghead Gas XX or Dry Gas	Box 1589, Rulsa, Oklaho	
	Warren Petroleum Corpor	Unit Sec. Twp. Rge.	Is gas actually connected? When	
	If well produces oil or liquids, give location of tanks.	G 16 21-S 37-E	Yes	Unknown
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA	Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Designate Type of Completio	0.1		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
				Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	rubing Depth
				Depth Casing Shoe
	Perforations	_		
		TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
₩	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil a	nd must be equal to or exceed top allow-
•	OIL WELL	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas lift	i, etc.)
	Date First New Oil Run To Tanks	Date of lear		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	20.00		Water - Bbls.	Gas-MCF
	Actual Prod. During Test	Oil-Bbls.	Wd(er - DDIs.	
	GAS WELL	. 		
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
			Casing Pressure (Shut-in)	Choke Size
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Schille Lines and Land	
	. CERTIFICATE OF COMPLIANCE		OIL CONSERVA	TION COMMISSION
VI			APPROVED SEP	1 1972
	I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	, 13
I hereby certify that the rules and regularization formation given Commission have been complied with and that the information given		BYOr	ig. Signed by	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Joe D. Ramey	
			11 1 1	· · · · · · · · · · · · · · · · · · ·
1 12 1 1 1 1 C			This form is to be filed in	compliance with RULE 1104.

(Signature) Area Engineer (Title)

August 31, 1972

(Date)

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

-		 -
NO. OF COPIES RECE	LIVED	
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	GAS	
OPERATOR		L
		l .

-	DISTRIBUTION SANTA FE	REQUEST FO	NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
 - -	U.S.G.S. LAND OFFICE		AND SPORT OIL AND NATURAL GA	AS.		
-	OPERATOR GAS					
1.	PRORATION OFFICE		, <u> </u>			
	Gulf Oil Corporation Address					
	Box 670, Hobbs, New Mexi	<u>1co 88240</u>	Other (Please explain)			
	Reason(s) for filing (Check proper box) New We!!	Change in Transporter of:	Change in oil tra	insporter, effective		
	Recompletion	Oil Dry Gas	September 1, 1972	2		
	Change in Ownership	Casinghead Gas Condenso	ate			
	If change of ownership give name and address of previous owner					
II.	DESCRIPTION OF WELL AND L	EASE Well No. Pool Name, Including For	mation Kind of Lease	Lease No.		
	Lease Name	3 Blinebry	State, Federal	or Fee State B-1732		
	Harry Leonard (NCT-E)					
	Unit Letter B 660	Feet From The North Line	and 1980 Feet From T	he <u>East</u>		
		•		Lea County		
	Line of Section 16 Tow	nship 21-S Range	37—Е , ммрм,	10-01		
777	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	Address (Give address to which approv	deep of this form is to be sent)		
111.	Name of Authorized Transporter of Oil .	of Condensaro				
	1CMab ((C)) 1CM-C		Address (Give address to which approv	Box 1510, Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sent)		
	Name of Authorized Transporter of Cashighted Cashighted		Box 1589 Tulsa Oklaho	oma 74100		
	Unit Sec. Twp. Rge. Is gas actually connected?					
	If well produces oil or liquids, give location of tanks.	G 16 21-S 37-E	Yes	Unknown		
	If this production is commingled wit	h that from any other lease or pool, g	give commingling order number:			
IV.	COMPLETION DATA	Oil Well Gas Weil	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completion		,			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
		THOMAS CASING AND	CEMENTING RECORD			
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & TOTAL				
		Town Day Town Day to Comment to the	feer recovery of total volume of load oil	and must be equal to or exceed top allow-		
V	. TEST DATA AND REQUEST F	able for this de	nth or be for full 24 hours)			
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	,,,,		
		Tubing Pressure	Casing Pressure	Choke Size		
	Length of Test	I doing Pressure				
	Actual Prod. During Test	OII-Bbls.	Water - Bble.	Gan - MCF		
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. 1881 MOF/D		A-1 A-1	Choke Size		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	CROKE SIZE		
٧,	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			
٧			APPROVEDSEP 1 1972 . 19			
			BYOrig. Signed by			
			Joe D. Ramey TITLE			
			This form is to be like it	1 COMPLIANCE HERE		
2 4 4			A 1140 101.111 10 10 11	owehle for a newly drilled or deepene		

(Signature)

Area Engineer (Title)

August 31, 1972 (Date)

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.

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