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t	DISTRIBUTIO					
Ì	SANTA FE					
ı	FILE					
	U.S.G.S.					
	LAND OFFICE					
	TRANSPORTER	OIL				
		GAS				
	OPERATOR					
	PRORATION OF					
	Operator					
	Gulf Oil Corporation					
	Address					

September 30, 1969

(Date)

SANTA FE	REQUEST	FOR ALLOWABLE			Old C-104 and C-110				
FILE		AND							
U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS								
LAND OFFICE				l ()					
TRANSPORTER GAS	-								
OPERATOR	-								
PRORATION OFFICE									
Operator									
	Gulf Oil Corporation								
Address Not Unbbo Not	Box 670, Hobbs, New Mexico 88240								
Reason(s) for filing (Check proper be	ox)	Other (Pleas	e explain)						
New Well	Change in Transporter of:								
Recompletion	Oil Dry Gas	s Re-ente	red plugge	d and abando	Died Marr				
Change in Ownership	Casinghead Gas Conden	sate	 						
If change of ownership give name									
and address of previous owner									
	ESCRIPTION OF WELL AND LEASE LOOM 18- MENTONA R-3877								
II. DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation	Kind of Lease		Lease No.				
Harry Leonard (NCT-E)	5 - Wildest - Mont	cy a	State, Federal	or Fee State	27179				
Location									
Unit Letter # ; 23	Feet From The Kenth Lin	e and	Feet From T	he Last					
	69 (0)	37-E , NMP1	ı. Les		County				
Line of Section 16	Township 21- S Range	37-E , NMPI	л, дос						
THE PROPERTY OF THE ANGRO	ADTED OF OIL AND NATURAL GA	ıs							
Name of Authorized Transporter of C	OIL AND NATURAL GA	Address (Give address	to which approv	ed copy of this form	is to be sent)				
Admiral Crude Gil Cor		Section 1	Media	nd, Texas 79	701				
Name of Authorized Transporter of (Casinghead Gas or Dry Gas	Address (Give address	to which approv	ed copy of this form	is to be sent)				
Vented - Waiting on 1	tank battery construction		10 10						
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connec	ted? Whe	n					
give location of tanks.	H 16 213 37-E	Ho							
If this production is commingled	with that from any other lease or pool,	give commingling orde	er number:						
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same	Res'v. Diff. Res'v.				
Designate Type of Comple	etion = (X)	x		1					
Date STATE He-entered	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
9-1-69	9-11-69	82201		73751					
Elevations (DF, RKB, RT, GR, etc.	.) Name of Producing Formation	Top Oil		Tubing Depth					
3181' GL	Montoya	7295'		73451 Depth Casing Shoe					
Perforations					•				
7295-97', 7317-19' &	7295-97', 7317-19' & 7331-33' TUBING, CASING, AND CEMENTING RECORD								
	CASING & TUBING SIZE	DEPTH		SACKS	CEMENT				
HOLE SIZE	12-3/4	2681		325 angka	(Circulated)				
17-1/4*	8_5/8*	27991		1100 sacks	(Circulated)				
7-7/8*	5-1/29	79991		131 sacks	(TOC at 5392				
7=1/0=	2-7/8*	73451		<u>i</u>					
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total vo	lume of load oil	and must be equal to	or exceed top allow				
OIL WELL	OIL WELL able for this depth or be for full 24 hours)								
Date First New Oil Run To Tanks	9-30-69	Pemping							
9-11-69 Length of Test	Tubing Pressure	Casing Pressure		Choke Size					
		et-40		46					
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		Gas-MCF					
232	226	6							
GAS WELL		Bbls. Condensate/MN	ICF	Gravity of Conde	negte				
Actual Prod. Test-MCF/D	Length of Test	Bots. Condensate/MA	•						
The second secon	Tubing Pressure (Shut-in)	Casing Pressure (Sh	et-in)	Choke Size					
Testing Method (pitot, back pr.)	I mand Linnama (amean)	•							
	ANCE	OIL	CONSERVA	TION COMMIS	S ON				
VI. CERTIFICATE OF COMPLI	MNCE		·	EP - 120	· • ·				
I hought contifu that the miles s	I hereby certify that the rules and regulations of the Oil Conservation		, _ A						
			1X Y	1 Charles					
above is true and complete to	Commission have been compiled with and that the intermediate and belief, above is true and complete to the best of my knowledge and belief.		DISTRICT						
		TITLE							
	AL SIGNED BY	This form is	to be filed in	compliance with	RULE 1104.				
C. E	D. BORLAND	If this is a r	equest for allower he accomp	wable for a newly	drilled or deepened ion of the deviation				
	(Signature)	tests taken on th	e well in acco	Idence Arts MAF	E 1114				
Ares Production Man	ager	- All sections	of this form m	ust be filled out c	ompletely for allow				
	(Title)	able on new and	recompleted w	ette.					

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.