NO. OF COPIES RECEIVED					
DISTRIBUTION	NEWNEYICO	IL CONSERVATION COMMISS	E.	orm C-104	
SANTA FE		EST FOR ALLOWABLE			d C-104 and C-11
FILE	1/ 2/01	AND	E	ffective 1-1-	65
U.S.G.S.	AUTHORIZATION TO	TRANSPORT OIL AND NATURAL	GAS		
LAND OFFICE					
TRANSPORTER GAS					
OPERATOR					
PRORATION OFFICE				_ <del>.</del>	
Gulf Oil Corporation Address					
Box 670, Hobbs, New Men	<b>xi</b> co	Other (Please explain)			
Reason(s) for filing (Check proper box)	Change in Transporter of:	Office (Trease explain)			
item went itenompletion		ory Gas			
Change in Ownership		ondensate			
If change of ownership give name	(In p	not And Chipter	11	1151	11.
and address of previous owner					
. DESCRIPTION OF WELL AND L Lease Name	Well No. Po	ol Name, Including Formation	Kind of L		
Bell-Ramsay (NCT-A)	13	Munice Grayburg	State, Fe	ederal or Fee	State
Location					
Unit Letter <b>U</b> ; <b>940</b>	Feet From The <b>South</b>	Line and <b>940</b> Feet From	n. The <b>Wes</b>	st	
•	or e	36-E , NMPM,	Lea		Country
Line of Section 4 , Town	nship <b>21-8</b> Range	, NMPM,	TICA		County
. DESIGNATION OF TRANSPORT	TED OF OH AND NATURA:	C 4 C			
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	roved copy of	this form is	to be sent)
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which app  Box 1910, Midland, To		this form is	to be sent)
Name of Authorized Transporter of Oil Shell Pipeline Corpore	or Condensate	Box 1910, Midland, To	BX48		
Name of Authorized Transporter of Otl  Shell Pipeline Corpora  Name of Authorized Transporter of Casi	or Condensate	Box 1910, Midland, To  Address (Give address to which app	BX48		
Name of Authorized Transporter of Oil  Shell Pipeline Corpora  Name of Authorized Transporter of Casi  Gas is vented - waitin	or Condensate in the condensat	Address (Give address to which app  Box 1910, Midland, To  Address (Give address to which app  ctions  e. Is gas actually connected?	BX48		
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Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Cast  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with  COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice	or Condensate in the condensat	Address (Give address to which app  Box 1910, Midland, To  Address (Give address to which app  Box 1910, Midland, To  Address (Give address to which app  Box 1910, Midland, To  Address (Give address to which app  Box 1910, Midland, To  Box 1910, Midland, To  Which app  Which app  Box 1910, Midland, To  Box 1910, Midland,	PC-87 Plug Bac P.B.T.D Tubing E	this form is  Same Root  O7!  Depth  82!  asing Shoe  6024!	to be sent)
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Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Cast  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with  COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Paol  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  11**  7-7/8**	or Condensate in the condensat	Address (Give address to which app  Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Fell New Well Workover Deepen  XX  Total Depth  6025  Top Oll/Gas Pay  3768  AND CEMENTING RECORD  DEPTH SET  1216  6021	PC-87 Plug Bac XX P.B.T.D Tubing I 388 Depth Cc	ck Same Root Sam	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE	or Condensate in the condensat	Address (Give address to which app  Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Fell New Well Workover Deepen  XX  Total Depth  6025'  Top Oll/Gas Pay  3768'  AND CEMENTING RECORD  DEPTH SET  1216  6021  It be after recovery of total volume of load of	PC-87 Plug Bac XX P.B.T.D Tubing I 388 Depth Cc	ck Same Root Sam	es'v. Diff. Res'v
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Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool Bunice Perforations 3768-3770.5', 3814.5-3  HOLE SIZE  11* 7-7/8*  7-1/8*  TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	or Condensate in the condensat	Address (Give address to which app  Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Vell New Well Workover Deepen  Total Depth  6025  Top Oil/Gas Pay  3768:  AND CEMENTING RECORD  E DEPTH SET  1246  6024  St be after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas	PC-87 Plug Bac XX P.B.T.D Tubing C Tubing C 388 Depth Cc	ck Same Root Sam	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  118  7-7/88	or Condensate in the stion inghead Gas or Dry Gas ing on flow line connections. Two Rg is a like in the strong of the strong ing on flow line connections. Two Rg is a like in the strong in the stron	Address (Give address to which app  Box 1910, Midland, To  Address (Give address to which app  Boxions  e. Is gas actually connected?  No  pool, give commingling order number:  Tell New Well Workover Deepen  XX  Total Depth  6025  Top Oll/Gas Pay  3768  AND CEMENTING RECORD  DEPTH SET  1216  6021  At the after recovery of total volume of load of this depth or be for full 24 hours)	PC-87 Plug Bac XX P.B.T.D Tubing C Tubing C 388 Depth Cc	this form is  Ck Same Ro  O7!  Depth  82!  asing Shoe  6024!  SACKS CE  Backs (())  Che equal to o	es'v. Diff. Res'v
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Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  118  7-7/88	or Condensate in the stion inghead Gas or Dry Gas ing on flow line connections. Two Rg is a like in the strong of the strong ing on flow line connections. Two Rg is a like in the strong in the stron	Address (Give address to which app  Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Yell New Well Workover Deepen  Total Depth  6025  Top Oil/Gas Pay  3768:  AND CEMENTING RECORD  E DEPTH SET  1216  6021  At the after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Pump	PC-87 Plug Bac XX P.B.T.D Tubing E 386 Depth Cc	ck   Same R.  O7! Depth B21 asing Shoe 6024! SACKS CE	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Cast  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with  COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  11"  7-7/8"  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  5-28-65  Length of Test  24 hours  Actual Prod. During Test	or Condensate in the condensat	Address (Give address to which app  Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Fell New Well Workover Deepen  XX  Total Depth  6025'  Top Oll/Gas Pay  3768'  SI  AND CEMENTING RECORD  E DEPTH SET  1216  6021  St be after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Pump  Casing Pressure  Water-Bbls.	PC-87 Plug Bac XX P.B.T.D 390 Tubing D 381 Depth Cc	ck   Same R.  O7! Depth B21 asing Shoe 6024! SACKS CE	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Anice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  11*  7-7/8*  7. TEST DATA AND REQUEST FOOLL WELL  Date First New Oil Run To Tanks  5-28-65  Length of Test  24 hours	or Condensate in the condensat	Address (Give address to which app  Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Total Depth  6025  Top Oil/Gas Pay  3768:  1., AND CEMENTING RECORD  E DEPTH SET  1216  6021  St be after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Pump  Casing Pressure	PC-87  Plug Bac  XX  P.B.T.D  390  Tubing Depth Co	ck   Same R.  O7! Depth B21 asing Shoe 6024! SACKS CE	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Cast  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with  COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  11"  7-7/8"  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  5-28-65  Length of Test  24 hours  Actual Prod. During Test	or Condensate in the condensat	Address (Give address to which app Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Yell New Well Workover Deepen  Total Depth  6025  Top Oil/Gas Pay  3768:  AND CEMENTING RECORD  E DEPTH SET  1216  6021  At be after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Pump  Casing Pressure  Water-Bbls.  136 (Bat)	PC-87 Plug Bac XX P.B.T.D 390 Tubing E 381 Depth Cc 375 550 Choke S Gas-MC	ck Same Root Same Same Same Same Same Same Same Same	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  11*  7-7/8*  7-7/8*  7-18*  7-18*  7-18*  Test DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  5-28-65  Length of Test  24 hours  Actual Prod. During Test  160 (Bst)	or Condensate in the condensat	Address (Give address to which app  Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Fell New Well Workover Deepen  XX  Total Depth  6025'  Top Oll/Gas Pay  3768'  SI  AND CEMENTING RECORD  E DEPTH SET  1216  6021  St be after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Pump  Casing Pressure  Water-Bbls.	PC-87 Plug Bac XX P.B.T.D 390 Tubing E 381 Depth Cc 375 550 Choke S Gas-MC	ck   Same R.  O7! Depth B21 asing Shoe 6024! SACKS CE	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  118  7-7/88  7-7/88  7. TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  5-28-65  Length of Test  24 hours  Actual Prod. During Test  160 (Est)  GAS WELL  Actual Prod. Test-MOF/D	or Condensate in the content of the	Address (Give address to which app Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Total Depth 6025' Top Oll/Gas Pay 3768'  Si AND CEMENTING RECORD  E DEPTH SET 1246 6024  St be after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Pump Casing Pressure  Water-Bbls. 136 (Bst)  Bbls. Condensate/MMCF	PC-87  Plug Bac  XX  P.B.T.D  388  Depth Co  375  550  Choke S  Gas-MC  Gravity	ck Same Root Sam	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  11*  7-7/8*  7-7/8*  7-18*  7-18*  7-18*  TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  5-28-65  Length of Test  24 hours  Actual Prod. During Test  160 (Est)  GAS WELL	or Condensate in the stion inghead Gas or Dry Gas ing on flow line connections. Two ing on flow line connections in the state of the st	Address (Give address to which app Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Yell New Well Workover Deepen  Total Depth  6025  Top Oil/Gas Pay  3768:  AND CEMENTING RECORD  E DEPTH SET  1216  6021  At be after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Pump  Casing Pressure  Water-Bbls.  136 (Bat)	PC-87 Plug Bac XX P.B.T.D 390 Tubing E 381 Depth Cc 375 550 Choke S Gas-MC	ck Same Root Sam	es'v. Diff. Res'v
Name of Authorized Transporter of Oil  Shell Pipeline Corpore  Name of Authorized Transporter of Casi  Gas is vented - waitin  If well produces oil or liquids, give location of tanks.  If this production is commingled with COMPLETION DATA  Designate Type of Completion  Date Spudded  Recompleted 5-12-65  Pool  Bunice  Perforations  3768-3770.5', 3814.5-3  HOLE SIZE  118  7-7/88  7-7/88  7. TEST DATA AND REQUEST FOOIL WELL  Date First New Oil Run To Tanks  5-28-65  Length of Test  24 hours  Actual Prod. During Test  160 (Est)  GAS WELL  Actual Prod. Test-MOF/D	or Condensate in the content of the	Address (Give address to which app Box 1910, Midland, R  Address (Give address to which app  Botions  e. Is gas actually connected?  No  pool, give commingling order number:  Total Depth 6025' Top Oll/Gas Pay 3768'  Si AND CEMENTING RECORD  E DEPTH SET 1246 6024  St be after recovery of total volume of load of this depth or be for full 24 hours)  Producing Method (Flow, pump, gas  Pump Casing Pressure  Water-Bbls. 136 (Bst)  Bbls. Condensate/MMCF	PC-87  Plug Bac  P.B.T.D  390  Tubing E  381  Depth Co  choke S  Gas-MC  Gravity  Choke S	ck Same R.  O7! Depth  82! Sang Shoe  6024! SACKS CE  Backs (  Bac	es'v. Diff. Res'v

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 SID . 1 1 2

Area Production Manager

June 22, 1965

(Signature)

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 Sections I, II, III, and VI only 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.