

DISTRIBUTION		
TA FE		
FILE		
G.S.		
ID OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <u>Gulf Oil Corporation</u>	
Address <u>Box 670, Hobbs, New Mexico 88240</u>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	<u>Abandoned Blinebry and completed in Drinkard</u>
Recompletion <input type="checkbox"/>	
Change In Ownership <input type="checkbox"/>	
Change In Transporter of:	
Oil <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Harry Leonard (NCT-C)</u>	Well No. <u>15</u>	Pool Name, including Formation <u>Drinkard</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>B-1732</u>
Location				
Unit Letter <u>G</u>	<u>1650</u>	Feet From The <u>North</u> Line and <u>2013</u>	Feet From The <u>East</u>	
Line of Section <u>36</u>	Township <u>21-S</u>	Range <u>36-E</u>	NMPM, <u>Lea</u>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>The Permian Corporation</u>	<u>Box 3119, Midland, Texas 79701</u>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>Warren Petroleum Corporation</u>	<u>Box 1589, Tulsa, Oklahoma 74100</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>N</u>	Sec. <u>36</u>	Twp. <u>21-S</u>	Rge. <u>36-E</u>	Is gas actually connected? <u>Yes</u>	When <u>November 10, 1975</u>

If this production is commingled with that from any other lease or pool, give commingling order number: PC-512

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
<u>Recompleted</u>								
Date Spudded <u>11-5-75</u>	Date Compl. Ready to Prod. <u>11-5-75</u>		Total Depth <u>6791'</u>		P.B.T.D. <u>6734'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>3498' GL</u>	Name of Producing Formation <u>Drinkard</u>		Top Oil/Gas Pay <u>6586'</u>		Tubing Depth <u>6511'</u>			
Perforations <u>6586' to 6698'</u>					Depth Casing Shoe <u>6790'</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>11"</u>	<u>8-5/8"</u>		<u>2135' - 1235'</u>		<u>400 sacks (Circulated)</u>			
<u>7-7/8"</u>	<u>5-1/2"</u>		<u>5892'</u>		<u>610 sacks (TOC at 2270')</u>			
<u>4-3/4"</u>	<u>4" (liner)</u>		<u>6790' (Top at 5786')</u>		<u>130 sacks (TOC at 5786')</u>			
	<u>2-3/8"</u>		<u>6511'</u>					

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 <u>11-5-75</u>	Date of Test <u>11-18-75</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pump</u>	
Length of Test <u>24 hours</u>	Tubing Pressure <u>--</u>	Casing Pressure <u>--</u>	Choke Size <u>2"</u>
Actual Prod. During Test <u>180 barrels</u>	Oil - Bbls. <u>122</u>	Water - Bbls. <u>58</u>	Gas - MCF <u>--</u>

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.

C.R. Koyfawa
(Signature)
Project Petroleum Engineer
(Title)
November 18, 1975
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY Jerry Sexton
TITLE _____

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.