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TRANSPORTER	OIL GAS		
OPERATOR			
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-110
Effective 1-1-65

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)
Drilled deeper and completed in Drinkard.

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Harry Leonard (NCT-C)	16	Drinkard	State	B-1732
Location Unit Letter <u>K</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>2240</u> Feet From The <u>West</u> Line of Section <u>36</u> Township <u>21-S</u> Range <u>36-E</u> , NMPM, <u>Lea</u> County				

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)
Texas-New Mexico Pipeline Company	Box 1510, Midland, Texas 79701
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)
Warren Petroleum Corporation	Box 1589, Tulsa, Oklahoma 74100
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	N 36 21-S 36-E Yes Unknown

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
<u>XX</u>					<u>XX</u>			<u>XX</u>
Date Recompleted <u>Recompleted</u>	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
<u>5-5-76</u>	<u>5-5-76</u>		<u>6815'</u>		<u>6773'</u>			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/ Gas Pay		Tubing Depth			
<u>3519' GL</u>	<u>Drinkard</u>		<u>6598'</u>		<u>6552'</u>			
Perforations					Depth Casing Shoe			
<u>6598' to 6741'</u>					<u>6815'</u>			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>11"</u>	<u>8-5/8"</u>	<u>1220'</u>	<u>350 sacks (Circulated)</u>
<u>7-7/8"</u>	<u>5-1/2"</u>	<u>5900'</u>	<u>735 sacks (TOC at 1800')</u>
<u>4-3/4"</u>	<u>4" liner</u>	<u>6815', top at 5826'</u>	<u>165 sacks (TOC at 5826')</u>
	<u>2-3/8"</u>	<u>6552'</u>	

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
<u>5-5-76</u>	<u>5-25-76</u>	<u>Pump</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
<u>24 hours</u>	<u>--</u>	<u>--</u>	<u>2"</u>
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
<u>126 barrels</u>	<u>44</u>	<u>82</u>	<u>--</u>

GAS WELL

Corrected gravity 38.2

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

D.T. Berlin
(Signature)
Area Engineer
(Title)
May 25, 1976
(Date)

OIL CONSERVATION COMMISSION

MAY 26 1976

APPROVED

BY Larry S. Suter
SUPERVISOR DISTRICT I

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.