

SA T A F E		
F i E		
G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

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

I. Operator
Gulf Oil Corporation
Address
Box 670, Hobbs, N.M. 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)
New Well

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name H. T. Mattern (NCT-C)	Well No. 7	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter J ; 2130 Feet From The south Line and 1980 Feet From The east Line of Section 18 Township 21S Range 37E , NMPM, Lea 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"/> Western Crude Oil, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 1142, Midland, Texas 79701				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma 74100				
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 18	Twp. 21S	Rge. 37E	Is well actually connected? When Yes 10-16-75

If this production is commingled with that from any other lease or pool, give commingling order number: PC-517

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
Date Spudded 9-9-75	Date Compl. Ready to Prod. 10-3-75		Total Depth 6785'		P.B.T.D. 6732'			
Elevations (DF, RKB, RT, GR, etc.) 3502' GL	Name of Producing Formation Drinkard		Top Oil 900 Pay 6502'		Tubing Depth 6613'			
Perforations 6520-22', 6554-56', 6586-88', 6656-58', 6673-75', 6691-93' and 6705-07'					Depth Casing Shoe 6785'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		1295'		500 sx (circulated)			
7-7/8"	5-1/2"		6772'		650 sx (TOC at 2350')			
	2-3/8"		6613		—			

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 10-3-75	Date of Test 10-17-75	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure —	Casing Pressure —	Choke Size 2" WO
Actual Prod. During Test 142 bbls	Oil - Bbls. 52	Water - Bbls. 90	Gas - MCF —

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

I. 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.F. Berlin
(Signature)
Area Engineer
(Title)
10-20-75
(Date)

OIL CONSERVATION COMMISSION
APPROVED 10/20/75, 19____
BY Guy Lepton
TITLE SUPERVISOR

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.