

U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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

If change of ownership give name and address of previous owner \_\_\_\_\_

THIS WELL HAS BEEN PLACED IN THE POOL \_\_\_\_\_

IF YOU DO NOT CONCUR \_\_\_\_\_

Lease Name H. T. Mattern (NCT-C)	Well No. 9	Pool Name, including Formation Drinkard R-5226	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter P	660	Feet From The South	Line and 710	Feet From The East
Line of Section 7	Township 21-S	Range 37-E	NMPM,	Lea County

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)	
Western Crude Oil, Inc.		Box 1142, 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 I	Sec. 18	Twp. 21-S
		Rge. 37-E	Is gas actually connected? Yes
			When 4-19-76

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		XX		XX					
Date Spudded 3-8-76	Date Compl. Ready to Prod. 4-7-76	Total Depth 6785'		P.B.T.D. 6747'					
Elevations (DF, RKB, RT, GR, etc.) 3489' GL	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6524'		Tubing Depth 6677'					
Perforations 6524' to 6710'				Depth Casing Shoe 6785'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
11"	8-5/8"		1320'		500 sacks (Circulated)				
7-7/8"	5-1/2"		6785' *		1000 sacks (Circulated)				
	2-3/8"		6677'						
			* DV tool at 1289'						

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 4-7-76	Date of Test 4-28-76	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure ---	Casing Pressure ---	Choke Size 2"
Actual Prod. During Test 40 barrels	Oil-Bble. 23	Water-Bble. 17	Gas-MCF -

GAS WELL		Corrected Gravity 38.4	
Actual Prod. Test-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 19____	
D. F. Berlin (Signature)		BY _____	
Area Engineer (Title)		SUPERVISOR DISTRICT I	
April 28, 1976 (Date)		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.	