

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.D.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	
Operator	

Gulf Oil Corporation

Address

P. O. Box 670, Hobbs, NM 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

DESCRIPTION OF WELL AND LEASE

R-7076 (10-1-82)

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
J. F. Janda (NCT-D)	2	Hardy Tubb	State, Federal or Fee Fee	
Location				
Unit Letter	N	2970 Feet From The	South	Line and
		1980 Feet From The	West	
Line of Section	2	Township	21S	Range
			36E	, NMPM, Lea
				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)					
Permian Corporation	Box 3119, Midland, TX 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)					
Phillips Petroleum Co.	Phillips Bldg., Odessa, TX 79760					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	N	2	21S	36E	No	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	XX		XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
12-16-81	3-3-82	6936'	6735'					
Elevations (DF, R&B, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3514' GL	Tubb	6554'	6735'					
Perforations			Depth Casing Shoe					
6554' - 6674'			--					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8-5/8"	1223'	600
7-7/8"	5 1/2"	6936'	2250

TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

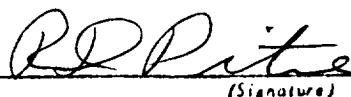
(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3-4-82	3-9-82	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs	25#	25#	--
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
34	25	9	135

GAS WELL

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
Division have been complied with and that the information given
above is true and complete to the best of my knowledge and belief.Area Engineer
(Title)7-14-82
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 16 1982
ORIGINAL SIGNED BY
BY JERRY SEXTON
TITLE DISTRICT 1 SUPR.

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 deviated
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allow-
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own-
er, well name or number, or transporter, or other such change of condition.Separate Forms C-104 must be filed for each pool in multiple
completed wells.

RECEIVED

JUL 15 1982

A.C.D.
HOSBS OFFICE