NO. OF COPIES REC	EIVED			
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SANTA FE	1			
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				

	SANTA FE FILE	1	FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65		
	U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (GAS		
I.	PRORATION OFFICE Operator					
	Gulf Gil Corporation					
	Address Box 670, Hobbs, New New	deo				
	Reason(s) for filing (Check proper box		Other (Please explain)	,		
	New Well	Change in Transporter of: Oil Dry Go		namo and well mumber		
	Change in Ownership	Casinghead Gas Conder				
	If change of ownership give name and address of previous owner					
II.	DESCRIPTION OF WELL AND	LEASE Well is eleged	1n. me, Including Formation	Kind of Lease		
	Lease Name South Fenrose Skelly Ur		se Skelly - Grayburg	State, Federal or Fee		
	Location		_	**		
	Unit Letter N; 6	60 Feet From The South Lir	ne and 1980 Feet From	The West		
	Line of Section , To	wnship 22-8 Range 3	7- 8 , NMPM,	Los County		
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS			
	Name of Authorized Transporter of O	or Condensate	Address (Give address to which appro			
	Shell Pipeline Corporation Name of Authorized Transporter of Casinghead Gas		Rox 1910, idland, Texas Address (Give address to which approved copy of this form is to be sent)			
	Larren Petrolew. Corporation			Box 1589, Tulsa, Oklahoma		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? Wh	nen		
		th that from any other lease or pool,	give commingling order number:			
1 V .	Designate Type of Completion	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Pool	Name of Producing Formation	Top Oil/Gαs Pαy	Tubing Depth		
	Perforations			Depth Casing Shoe		
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
*7	THEST DATA AND DECUEST E	OD ALLOWADIE (Test must be a	after recovery of total valume of land ail	l and must be equal to or exceed top allows		
٧.	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Cil Run To Tanks Date of Test One Test Date of Test One Test Date of Test One T					
	Date First New Oil Run To Tanks	Date of Test	Producing Method (rtow, pump, gas t	.iji, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF		
	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	resting Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size		
VI.	CERTIFICATE OF COMPLIAN	ICE	OIL CONSERVATION COMMISSION			
	I hereby certify that the rules and Commission have been complied	regulations of the Oil Conservation with and that the information given	APPROVED 1:av 27	, 19 65		

VI

above is true and complete to the best of my knowledge and belief.

Area Production Lanager (Title)

Tay 13, 1965

(Date)

APPRO	/ED1	av 27			19 65
BY A	100	() /K	This	1	
TITLE _	Supervis	or. Dist	nict 1		

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 Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.