

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 1-1-85

SA	TA	FE			
FI	E				
G.S.					
L	ID	OFFICE			
TRANSPORTER	OIL				
	GAS				
OPERATOR					
PRORATION 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"/>	Abandoned San Andres & completed in Blinebry. Permission to temporarily commingle this production with other Drinkard production on this lease.
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 _____

Lease Name W. M. Rinewalt	Well No. 3	Pool Name, Including Formation Blinebry	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter E ; 2086 Feet From The North Line and 766 Feet From The West Line of Section 4 Township 22-S Range 37-E , NMPM, Lea County				

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation		Address (Give address to which approved copy of this form is to be sent) Box 1910, 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 E	Sec. 4	Twp. 22-S
		Rge. 37-E	Is gas actually connected? Yes
			When 8-9-75

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

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 Recompleted 8-2-75	Date Compl. Ready to Prod. 8-2-75	Total Depth 6585'	P.B.T.D. 6404'
Elevations (DF, RKB, RT, GR, etc.) 3452' GL	Name of Producing Formation Blinebry	Top of XXX Pay 5566'	Tubing Depth 5901'
Perforations 5566' to 5895'			Depth Casing Shoe 6500'

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	325'	300 sacks (Circulated)
12-1/4"	9-5/8"	2975'	1300 sacks (TOC at 765')
8-3/4"	7"	6500'	650 sacks
	2-3/8"	5901'	

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 8-2-75	Date of Test 8-22-75	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure --	Casing Pressure --	Choke Size 2"
Actual Prod. During Test 32 barrels	Oil - Bbls. 28	Water - Bbls. 4	Gas - MCF 33

GAS WELL Corrected Gvty = 40.0			
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

VI. 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 John W. Remyer
Area Engineer (Title)	TITLE _____
August 22, 1975 (Date)	This form is to be filed in compliance with RULE 11C If this is a request for allowable for a newly drilled or well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes well name or number, or transporter, or other such change of