

DISTRIBUTION		
SA TAFE		
FILE		
G.S.		
FIELD 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

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"/>	Change in Transporter of:	Well is connected to Warren's system but run to El Paso Natural Gas Co. Account	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>		
	Dry Gas <input type="checkbox"/>		
	Condensate <input type="checkbox"/>		

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hugh	Well No. 1	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter D ; 660 Feet From The North Line and 660 Feet From The West				
Line of Section 14 Township 22-S Range 37-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Shell Pipe Line Corporation	Box 1910, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input 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 B	Sec. 14	Twp. 22S	Range 37-E
	Is gas actually connected? Yes		When August 29, 1974	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded xxxxx Recompleted 2-13-74	Date Compl. Ready to Prod. 2-13-74	Total Depth 6463'		P.B.T.D. 6330'					
Elevations (DF, RKB, RT, GR, etc.) 3372' GL	Name of Producing Formation Drinkard	Top Oil/Gas Pay xx 6204'		Tubing Depth 6143'					
Perforations 6204' to 6324'				Depth Casing Shoe 6348'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
17-1/4"	13-3/8"		301'		300 sacks (Circulated)				
12-1/4"	9-5/8"		2849'		1300 sacks (TOC at 1195')				
8-3/4"	7"		6348'		700 sacks (TOC at 2665')				
	2-3/8"		6143'						

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)

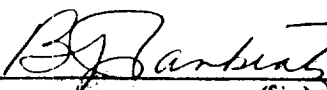
Date First New Oil Run To Tanks 2-13-74	Date of Test 11-2-74	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 1020#	Casing Pressure --	Choke Size 24/64"
Actual Prod. During Test 14 barrels	Oil-Bbls. 14	Water-Bbls. 0	Gas-MCF 1001.0

GAS WELL

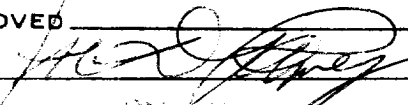
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. 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.


(Signature)
Area Engineer
(Title)
November 6, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY 
TITLE _____

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.

RECEIVED

NOV 6 1971

**OIL CONSERVATION COMM.
HOBBS, N. M.**