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•	SANTA FE				
	FILE				
	U.S.G.S,				
	LAND OFFICE				
	IRANSPORTER	OIL			
		GAS			
	OPERATOR				
	PRORATION OFFICE				
	Operator				
	Gulf Oil Corporation				
	Address				
	Box 670, Hobbs, New Me				
	Reason(s) for filing (Check proper box				
	Now Well				
	Recompletion				
	Change in Ownership				

WEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

FILE		AND	Effective 1-1-65			
			0.16			
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS			
LAND OFFICE		· -				
IRANSPORTER OIL						
GAS						
OPERATOR						
<u> </u>			•			
I. PRORATION OFFICE	<u>L</u>		· 			
Operator						
Gulf Oil Corporation	1f Oil Corporation					
Address						
Par 670 Habbb Nov	Box 670, Hobbs, New Mexico 88240					
Reason(s) for filing (Check proper to	next of 30240	Other (Please explain)				
New Mell	Change in Transporter of:	1 1 1	bry and completed in			
Recompletion	OII Dry G	🐃 🖳 Cary Montoya.				
Change in Ownership	Casinghead Gas Condo	nsate				
If change of ownership give name	•					
and address of previous owner						
I. DESCRIPTION OF WELL AN	D LEASE					
Lease Name	Well No. Pool Name, Including F	ormation Kind of Leas	Lecre No.			
R. E. Cole (NCT-A)	5 Cary Montoya	State, Feder	ol or Fee State E-3480-1			
	J Cary Montoya		12 3400 X			
Location			·			
Unit Letter I ; 20	186 Feet From The South Liv	ne and 554 Feet From	The East			
Line of Section 16	Township 22-S Range	37-E , NMPM,	Lea County			
Line of Section 20	. Owner, and a second s					
		• •				
	RTER OF OIL AND NATURAL GA	AS				
Name of Authorized Transporter of	OII 📉 or Condensate 🔲 "	Address (Give address to which appro	oved copy of this form is to be sent;			
Shell Pipe Line Corp	oration	Box 1910, Midland, Te	xas 79701			
Name of Authorized Transporter of	Casinghead Gasyy or Dry Gas	Address (Give address to which appre	oved copy of this form is to be sent)			
		n 1500 m. 1 01-1-	J 7/100			
Warren Petroleum Con		Box 1589, Tulsa, Okla				
if well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	nen :			
give location of tanks.	! J ! 16 22-S 37-E	Yes	11-14-75			
		sing some seller order numbers				
	with that from any other lease or pool,	give comminging order number:	C-329			
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.			
Designate Type of Comple	Nine (V)	1	Frag Book Same (No. 1) Shirt (1)			
Designate Type of Comple	tion = (X) XX	; XX				
Date Sexidizk Recompleted	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
11 24 75	11-24-75	8066'	7300			
11-24-75 Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gos Pay	Tubing Depth			
1	į					
3416' GL	Montoya	7224'	7270'			
Perforations			Depth Casing Shoe			
7224' to 7258'			7953'			
	TUBING, CASING, AND CEMENTING RECORD					
UOL 5 5175	CASING & TUBING SIZE	DEPTH SET	SACKS CEMEST			
HOLESIZE						
17-1/2"	13-3/8"	295'	300 sacks (Circulated)			
12-1/4"	9-5/8"	2900'	1300 sacks (TOC at 1225!			
8-3/4"	7"	7953'	800 sacks (TOC at 3555'			
	2-3/8"	7270'				
. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	ifter recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allow-			
OIL WELL	able for this de		id at 1			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	iji, etc.)			
11-24-75	1-8-76	Pump				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
24 hours			211			
		Water-Bbls.	Gan - MCF			
Actual Prod. During Test	Oil-Bble.	1				
13 barrels	8	5				
***************************************		•				
GAS WELL Corrected Gravity 41.1						
Actual Prod. Tool-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
ACION FION (BEL-MOF/D		1				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	1					
Company of the contract of	NOR	OIL CONSERV	ATION COMMISSION			
I. CERTIFICATE OF COMPLIA	NCE	OIL CONSERV				
I hereby certify that the rules ar	d regulations of the Oil Conservation	APPROVED, 19				
Commission have been complied	i with and that the information given	- Viston				
shove is true and complete to	the best of my knowledge and belief.	I BY WATER TO THE	BY The state of th			
		SUPERVISOR EMERICORY				
		TITLE	TITLE			
· ~ ~ 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				
D. F. Berlin						
	gnatwe)	well this form must be accomp	anied by a tabulation of the deviction			
(Si	gnuswej	tests taken on the well in acco	rdance with RULE 111.			
Area Engineer		All sections of this form mi	All sections of this form must be filled out completely for allowable on new and recompleted wells.			
	Title)	able on new and recompleted w				
T 0 1	177	Fill out only Sections I. I	I. III. and VI for changes of owner,			
	176	well name or number, or transporter, or other such change of condition.				