

DISTRIBUTION			
SALE			
FILE			
G.S.			
LAND 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		CASEINGHEAD GAS MUST NOT BE	
Address Box 670, Hobbs, New Mexico 88240		3/11/74 UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT WASHINGTON, D.C. 20460	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	Abandoned Paddock & completed in Wantz Granite Wash	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Ella	Well No. 1	Pool Name, Including Formation Wantz Granite Wash	Kind of Lease Fee	Lease No.
Location Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line of Section 25 Township 22-S Range 37-E , 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)					
The Permian Corporation	Box 3119, Midland, Texas 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)					
None - Waiting on Tank Battery Construction						
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 25	Twp. 22-S	Rge. 37-E	Is gas actually connected? No	When

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Recompleted	XX				XX			
Date XXXX 12-27-73	Date Compl. Ready to Prod. 12-27-73	Total Depth 7223'	P.B.T.D. 7216'					
Elevations (DF, RKB, RT, GR, etc.) 3325' GL	Name of Producing Formation Granite Wash	Top Oil/Gas Pay 7147'	Tubing Depth 6700'					
Perforations 7147' to 7209'			Depth Casing Shoe 7219'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	294'	300 sacks (Circulated)
12-1/4"	9-5/8"	2900'	1300 sacks (TOC at 1535')
8-3/4"	7"	6365'	700 sacks (TOC at 2845')
	4-1/2" liner	Top @ 6012, bot @ 7219'	230 sacks (TOC at 6012)

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks 12-27-73	Date of Test 1-28-74	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure --	Casing Pressure --	Choke Size 2"
Actual Prod. During Test 68 barrels	Oil-Bbls. 66	Water-Bbls. 2	Gas-MCF -

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

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.

K. J. Brezencle
(Signature)
Area Engineer
(Title)
January 28, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **Joe [Signature]**
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.