

SA TAFE		
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-1
Effective 1-1-65

I. Operator
Gulf Oil Corporation
Address
P. O. Box 670, Hobbs, N.M. 88240

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	New Well CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>7-15-74</u> UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name H. T. Mattern (NCT-D)	Well No. 8	Pool Name, Including Formation Drinkard	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>E</u> <u>1980</u> Feet From The <u>north</u> Line and <u>660</u> Feet From The <u>west</u> Line of Section <u>6</u> Township <u>22S</u> Range <u>37E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Western Crude Oil Co., Inc.	Address (Give address to which approved copy of this form is to be sent) Box 1142, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None - producing into test tanks	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? No When

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-14-74	Date Compl. Ready to Prod. 7-15-74	Total Depth 6820'	P.B.T.D. 6786'					
Elevations (DF, RKB, RT, GR, etc.) 3467' GL	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6520'	Tubing Depth 6506'					
Perforations 6520-22', 6544-46', 6573-75', 6612-14', 6666-68'	Depth Casing Shoe 6818'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12-1/4"	8-5/8"	1169'	400 sx - circulated					
7-7/8"	5-1/2"	6820'	765 sx - TOC 2310'					
	2-3/8"	6506'						

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 7-15-74	Date of Test 7-17-74	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 125#	Casing Pressure	Choke Size 26/64"
Actual Prod. During Test 187	Oil - Bbls. 135	Water - Bbls. 52	Gas - MCF --

GAS WELL

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

I. 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.

B. J. Burkhart
Area Engineer
July 18, 1974

OIL CONSERVATION COMMISSION

APPROVED SUPERVISOR
BY [Signature]
TITLE [Signature]

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.