

DISTRIBUTION			
SA	TA	FE	
FI	E		
G.S.			
ID	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:
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"/>
Dualled Drinkard W/existing Wantz GW. MC-2185. Gas is connected to Warren's system but run to El Paso Natural Gas Co. Account.	

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Ella	Well No. 2	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter B	560	Feet From The North	Line and 1980	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 type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texas-New Mexico Pipeline Co.	Box 1510, 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 A	Sec. 25	Twp. 22-S	Rge. 37-E	Is gas actually connected? Yes	When April 24, 1975

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

PC-509

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.
Dualled	X							
Date Spaced 4-24-75	Date Compl. Ready to Prod. 4-24-75		Total Depth 7455'		P.B.T.D. 7445'			
Elevations (DF, RKB, RT, GR, etc.) 3318' GL	Name of Producing Formation Drinkard		Top Oil/Gas Pay 6247'		Tubing Depth 6220'			
Perforations 6247' to 6445'					Depth Casing Shoe 7454'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8"	1155'	300 sacks (Circulated)
8-3/4"	7"	7149'	1000 sacks (TOC at 2270')
6-1/4"	4-1/2" Liner. Top at 6988'	7454'	90 sacks (TOC at 6988')

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)

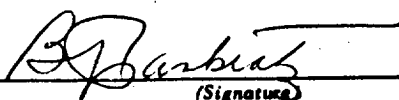
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 829	Length of Test 24 hours	Bbls. Condensate/MMCF 0	Gravity of Condensate --
Testing Method (pitot, back pr.) Flow Meter	Tubing Pressure (shut-in) 425# Flowing	Casing Pressure (shut-in) --	Choke Size 3/4"

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)

May 6, 1975

(Date)

OIL CONSERVATION COMMISSION

APPROVED

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.