G.S. TRANSPORTER GAS OAS	REQUEST	FOR ALLOWABLE AND ANSPORT OIL AND NATURAL (Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 GAS
OPERATOR PRORATION OFFICE Operator	<u> </u>		
Gulf Oil Corporation			
Box 670, Hobbs, New Me	exico 88240	Other (Please explain)	
Reason(s) for filing (Check proper box) New We!!	Change in Transporter of:		
Recompletion	Oil Dry Ga	New Well	
Change in Ownership	Casinghead Gas Conder	nsate	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND L	FASF		
Lease Name	Well No. Pool Name, Including F	ormation Kind of Lease	Lease No.
H. T. Mattern (NCT-D)	10 Drinkard	State, Federa	1 or Fee Fee
Unit Letter C; 660	Feet From The North Lin	ne and 1650 Feet From	The West
Line of Section 6 Town	nship 22-S Range	37-Е , МРМ,	Lea County
DESIGNATION OF TRANSPORT	FR OF OIL AND NATURAL GA	ıs	
Name of Authorized Transporter of Oil		Address (Give address to which appro-	ved copy of this form is to be sent)
Western Crude Oil, Inc	· · · · · · · · · · · · · · · · · · ·	Box 1142, Midland, Te	xas 79701
Name of Authorized Transporter of Casi	Inghead Gas or Dry Gas	Address (Give address to which appro-	ved copy of this form is to be sent)
Warren Petroleum Corpo	ration Unit Sec. Twp. Rge.	Box 1589, Tulsa, Okla	homa 74100
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. A 1 22-S 37-E	Yes	May 28, 1975
If this production is commingled with		<u> </u>	CTB-254
COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completion		XX	1 1 1
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
4-25-75	5-19-75	6800'	6757'
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Cil/XXX Pay	Tubing Depth
3464' GL	Drinkard	6456	6440 Depth Casing Shoe
Perforations		· · · · · · · · · · · · · · · · · · ·	
1 -			
6456' to 6700'	TURING CASING AND	CEMENTING RECORD	6799'
6456' to 6700'		CEMENTING RECORD	6799'
6456' to 6700'	CASING & TUBING SIZE	DEPTH SET	67991
6456' to 6700' HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"	оертн se т 1199 '	6799' SACKS CEMENT 400 sacks (Circulated)
6456' to 6700'	CASING & TUBING SIZE 8-5/8" 5-1/2"	DEPTH SET 1199' 6799'	6799' SACKS CEMENT 400 sacks (Circulated)
6456' to 6700' HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"	оертн se т 1199 '	6799 SACKS CEMENT
6456' to 6700' HOLE SIZE 11" 7-7/8" TEST DATA AND REQUEST FO	CASING & TUBING SIZE 8-5/8" 5-1/2" 2-3/8" OR ALLOWABLE (Test must be a.	DEPTH SET 1199 6799 6440 fter recovery of total volume of load oil epth or be for full 24 hours)	SACKS CEMENT 400 sacks (Circulated) 650 sacks (TOC at 2400) and must be equal to or exceed top allow-
6456' to 6700' HOLE SIZE 11" 7-7/8"	CASING & TUBING SIZE 8-5/8" 5-1/2" 2-3/8" OR ALLOWABLE (Test must be a.	DEPTH SET 1199 ' 6799 ' 6440 fter recovery of social volume of load oil	SACKS CEMENT 400 sacks (Circulated) 650 sacks (TOC at 2400) and must be equal to or exceed top allow-
HOLE SIZE 11" 7-7/8" TEST DATA AND REQUEST FO OIL WELL Date First New Oil Run To Tanks 5-19-75	CASING & TUBING SIZE 8-5/8" 5-1/2" 2-3/8" OR ALLOWABLE (Test must be a able for this de Date of Test 5-28-75	DEPTH SET 1199 6799 6440 fter recovery of total volume of load oil or be for full 24 hours) Producing Method (Flow, pump, gas light of the first of the firs	sacks CEMENT 400 sacks (Circulated) 650 sacks (TOC at 2400) and must be equal to or exceed top allow-
HOLE SIZE 11" 7-7/8" TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	CASING & TUBING SIZE 8-5/8" 5-1/2" 2-3/8" OR ALLOWABLE (Test must be a able for this de Date of Test 5-28-75 Tubing Pressure	DEPTH SET 1199 6799 6440 fter recovery of total volume of load oil path or be for full 24 hours) Producing Method (Flow, pump, gas li	SACKS CEMENT 400 sacks (Circulated) 650 sacks (TOC at 2400) and must be equal to or exceed top allow- ft, etc.) Choke Size
HOLE SIZE 11" 7-7/8" TEST DATA AND REQUEST FO OIL WELL Date First New Oil Run To Tanks 5-19-75 Length of Test 24 hours	CASING & TUBING SIZE 8-5/8" 5-1/2" 2-3/8" PR ALLOWABLE (Test must be a able for this de Date of Test 5-28-75 Tubing Pressure 700#	DEPTH SET 1199 6799 6440 fter recovery of total volume of load oil or be for full 24 hours) Producing Method (Flow, pump, gas light of the first of the firs	sacks CEMENT 400 sacks (Circulated) 650 sacks (TOC at 2400) and must be equal to or exceed top allow-
HOLE SIZE 11" 7-7/8" TEST DATA AND REQUEST FOOIL, WELL Date First New Oil Run To Tanks 5-19-75 Length of Test 24 hours Actual Prod. During Test	CASING & TUBING SIZE 8-5/8" 5-1/2" 2-3/8" OR ALLOWABLE (Test must be a able for this de Date of Test 5-28-75 Tubing Pressure 700# Oil-Bble.	DEPTH SET 1199 6799 6440 fter recovery of total volume of load oil opth or be for full 24 hours) Producing Method (Flow, pump, gas lift) Flow Casing Pressure Water-Bbls.	SACKS CEMENT 400 sacks (Circulated) 650 sacks (TOC at 2400) and must be equal to or exceed top allow- ft, etc.) Choke Size
HOLE SIZE 11" 7-7/8" TEST DATA AND REQUEST FO OIL WELL Date First New Oil Run To Tanks 5-19-75 Length of Test 24 hours	CASING & TUBING SIZE 8-5/8" 5-1/2" 2-3/8" PR ALLOWABLE (Test must be a able for this de Date of Test 5-28-75 Tubing Pressure 700#	DEPTH SET 1199 6799 6440 fter recovery of total volume of load oil path or be for full 24 hours) Producing Method (Flow, pump, gas lift) Flow Casing Pressure	SACKS CEMENT 400 sacks (Circulated) 650 sacks (TOC at 2400) and must be equal to or exceed top allow- ft, etc.) Choke Size

Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

May 28, 1975

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.

Blanker
(Signature)
Area Production Manager
(Title)

(Date)

OIL CONSERVATION COMMISSION

APPRQVED COL C 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.

H.T. Mattern (NCT-D) No. I	H.T.	. Mattern	(MCT-D)	No.	ΙC
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