

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF OPERATOR	
LAND OFFICE	
TRANSPORTER	
OPERATION	
PERMITTING OFFICE	
REGULATOR	

Gulf Oil Corporation

Address
P. O. Box 670, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Other (Please explain)

DHC Blinebry, Tubb, Drinkard
(R-7283)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name H. T. Mattern (NCT-D)	Well No. 11	Pool Name, Including Formation Drinkard	Kind of Lease State, Federal or Fee	Fee	Lease ...
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line of Section <u>6</u> Township <u>22S</u> Range <u>37E</u> , NMPM, Lea County					

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, OK 74100					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 6	Twp. 22S	Rge. 37E	Is gas actually connected? Yes	When 7-20-78

If this production is commingled with that from any other lease or pool, give commingling order number: PLC-52

COMPLETION DATA

Designate Type of Completion - (X) XX	Oil Well ☐	Gas Well ☐	New Well ☐	Workover ☐	Deepen ☐	Plug Back ☐	Same Hst'y. ☐	Diff. Est. ☐
Date Spud 5-11-83	Date Compl. Ready to Prod. 5-13-83		Total Depth 6800'		P.B.T.D. 6750'			
Elevations (D.F., RKB, RT, GR, etc.) 3457' GL	Name of Producing Formation Drinkard		Top Oil/Gas Pay 5465'		Tubing Depth 6639'			
Perforations 5465'-6643'					Depth Casing Shoe --			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE No New Casing	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 5-13-83	Date of Test 5-17-83	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure 35#	Casing Pressure 0#	Choke Size --
Actual Prod. During Test 27	Oil - Bbls. 3	Water - Bbls. 14	Gas - MCF 32

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

R.D. Pite
(Signature)

Area Engineer

(Title)

6-1-83

(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 3 1983, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

TITLE

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the dev. tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for a well on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.
Separate Forms C-104 must be filed for each pool in newly completed wells.

RECEIVED
JUN 2 1983
O.C.D.
HOBBS OFFICE