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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-101
Supersedes Old C-101 and C-11
Effective 1-1-65

Operator Gulf Oil Corporation	
Address Box 670, Hobbs, New Mexico	
Reason(s) for filing (Check proper box)	
New Well ☐	Change In Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change In Ownership ☐	Casinghead Gas ☐ Condensate ☐
Other (Please explain) To show gas connected and gas Transporter	

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE					
Lease Name Lee Stebbins (NCT-A)	Well No. 4	Pool Name, Including Formation Drinkard	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter E ; 1830 Feet From The North Line and 660 Feet From The West					
Line of Section 5 Township 22-S Range 37-E , NMPM, Lea County					

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Shell Pipe Line Corporation			Address (Give address to which approved copy of this form is to be sent) Box 1910, Midland, Texas 79701		
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Warren Petroleum Corporation			Address (Give address to which approved copy of this form is to be sent) Box 1589, Tulsa, Oklahoma 74100		
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 5	Twp. 22-S	Rge. 37-E	Is gas actually connected? When Yes March 9, 1977

If this production is commingled with that from any other lease or pool, give commingling order number: CTB-262

V. COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

VI. 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VII. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 1977	
Area Engineer D. F. Berlin (Signature)		Orig. Signed by John Runyan Geologist	
March 11, 1977 (Date)		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 logs taken on the well in accordance with RULE 111.	
		All portions of this form must be filled out completely for allowable on new and re-completed 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.	

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ON 10/10/1961