

SALE PRICE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

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

Operator Gulf Oil Corporation	
Address P. O. Box 670, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	
New Well ☒	Change In Transporter of Oil ☐
Recompletion ☐	Oil ☐ Dry Gas ☐
Change In Ownership ☐	Casinghead Gas ☐ Condensate ☐
Other (Please explain) To show gas connection date.	

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name A. L. Christmas (NCT-C)	Well No. 14	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter D	560	Feet From The North	Line and 810	Feet From The West	
Line of Section 18	Township 22-S	Range 37-E	N.M.P.M.	Lea	County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Western Crude Oil, Inc	Address (Give address to which approved copy of this form is to be sent) Box 1142, Midland TX 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 G	Sec. 18	Twp. 22-S	Rge. 37-E	Is gas actually connected? yes	When 10-18-77

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.D.T.D.		
Elevations (DF, RKB, RT, GR, 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		

IV. 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)

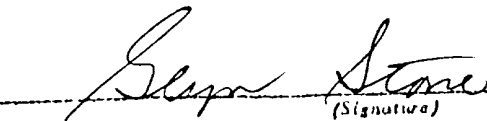
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

V. 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)

10-31-77

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY _____ Orig. Signed by

Jerry Sutton

TITLE _____ Dist. 1, Sec. 1

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 deviate tests taken on the well in accordance with RULE 111.

All portions of this form must be filled out completely for allowables 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 conditions.

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Form C-105
Revised 11-66

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease	
State ☐	Fee ☐
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL	7. Unit Agreement Name
OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐ b. TYPE OF COMPLETION NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐	8. Form or Lease Name
	A. L. Christmas (NCT)

2. Name of Operator	9. Well No.
Gulf Oil Corporation	14
3. Address of Operator	10. Field and Pool, or Wildcat
P. O. Box 670, Hobbs, NM 88240	Drinkard

4. Location of Well	11. County
UNIT LETTER <u>D</u> LOCATED <u>560</u> FEET FROM THE <u>North</u> LINE AND <u>810</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>18</u> TWP. <u>22-S</u> RGE. <u>37-E</u> NMPN	Lea

15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Casinghead
9-18-77	9-28-77	10-9-77	3433' GL	-
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	Rotary Tools
6700'	6638'	-	0-6700'	Cable Tools

24. Producing Interval(s), of this completion - Top, Bottom, Name	25. Was Directional Survey Made
6485-6599' Drinkard	No

26. Type Electric and Other Logs Run	27. Was Well Cored
Gamma Ray, Bulk Density	No

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8"	24#	1177'	12 1/4"	500 sacks - Circ	
5 1/2"	17#-15.5#	6700'*	7 7/8"	1900 sacks - Circ	
*DV tool at 6319'					

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 3/8"	6452'	6452'

31. Perforation Record (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.								
Corrected Perfs Perforated 5 1/2" casing with 2-1/2" JHPF at 6485-87', 6515-17', <u>6560-62'</u> and 6597-99'.	<table border="1"> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> <tr> <td>6485-6599'</td> <td>2271 gallon 15% NE iron stabilized acid.</td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	6485-6599'	2271 gallon 15% NE iron stabilized acid.				
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6485-6599'	2271 gallon 15% NE iron stabilized acid.								

33. PRODUCTION							
Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)					Well Status (Prod. or Shut-in)	
10-9-77	Pumping					Prod	
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
10-16-77	24	2"		76		55	-
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
-	-		76		55	39.6	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)	Test Witnessed By
In process of laying line, to be sold	O. W. Wink

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED <u>M. B. Sikes, Jr.</u>	TITLE <u>Area Engineer</u>	DATE <u>10-17-77</u>
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OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

Form C-105
Revised 11-1-8

5a. Indicate Type of Lease	
State ☐	Fee ☒
5b. State Oil & Gas Lease No.	

1a. TYPE OF WELL OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER ☐						7. Unit Agreement Name	
b. TYPE OF COMPLETION NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER ☐						8. Form or Lease Name A. L. Christmas (NCT-C)	
2. Name of Operator Gulf Oil Corporation						9. Well No. 14	
3. Address of Operator P. O. Box 670, Hobbs, NM 88240						10. Field and Pool, or Wildcat Drinkard	
4. Location of Well UNIT LETTER D LOCATED 560 FEET FROM THE North LINE AND 810 FEET FROM THE West LINE OF SEC. 18 TWP. 22-S RGE. 37-E						11. County Lea	
15. Date Spudded 9-18-77	16. Date T.D. Reached 9-28-77	17. Date Compl. (Ready to Prod.) 10-9-77	18. Elevations (DF, RKB, RT, GR, etc.) 3433' GL	19. Elev. Casinghead -			
20. Total Depth 6700'	21. Plug Back T.D. 6638'	22. If Multiple Compl., How Many -	23. Intervals Drilled By Rotary Tools	Cable Tools -			
24. Producing Interval(s), of this completion - Top, Bottom, Name 6485-6599' Drinkard						25. Was Directional Survey Made No	
26. Type Electric and Other Logs Run Gamma Ray, Bulk Density						27. Was Well Cored No	
28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
8 5/8"	24#	1177'	12 1/4"	500 sacks - Circ			
5 1/2"	17#-15.5#	6700'*	7 7/8"	1900 sacks - Circ			
		*DV tool at 3319'					
29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	
					2 3/8"	6452'	
						6452'	
31. Perforation Record (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
Perforated 5 1/2" casing with 2-1/2" JHPF at 6485-87', 6515-17', 6660-62' and 6597-99'.				DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED			
				6485-6599' 2271 gallon 15% NE iron stabilized acid.			
33. PRODUCTION							
Date First Production 10-9-77		Production Method (Flowing, gas lift, pumping - Size and type pump) Pumping				Well Status (Prod. or Shut-in) Prod	
Date of Test 10-16-77	Hours Tested 24	Choke Size 2"	Prod'n. For Test Period 76	Oil - Bbl. 76	Gas - MCF 55	Water - Bbl. 55	
Flow Tubing Press. -	Casing Pressure -	Calculated 24-Hour Rate 76	Oil - Bbl. 76	Gas - MCF 55	Water - Bbl. 55	Oil Gravity - API (Corr.) 39.6	
34. Disposition of Gas (Sold, used for fuel, vented, etc.) In process of laying line, to be sold						Test Witnessed By O. W. Wink	
35. List of Attachments							
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.							
SIGNED M. B. Sikes, Jr.			TITLE Area Engineer		DATE 10-17-77		

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt <u>1194</u>	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt <u>2438</u>	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates <u>2610</u>	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers <u>2854</u>	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen <u>3342</u>	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg <u>3617</u>	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres <u>3889</u>	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta <u>5108</u>	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinberry <u>5434</u>	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb <u>6139</u>	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard <u>6439</u>	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from _____ to _____	No. 4, from _____ to _____
No. 2, from _____ to _____	No. 5, from _____ to _____
No. 3, from _____ to _____	No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from _____ to _____ feet.
No. 2, from _____ to _____ feet.
No. 3, from _____ to _____ feet.
No. 4, from _____ to _____ feet.

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
1194	2438		Salt				
2438	2610		Anhydrite, dolomite, shale				
2610	2854		Dolomite, anhydrite, sand, shale				
2854	3342		Dolomite, sandstone				
3342	3617		Dolomite, sand				
3617	3889		Limestone, sand, dolomite				
3889	5108		Dolomite, sand				
5108	5434		Dolomite, limestone				
5434	6149		Dolomite, sand, limestone				
6149	6439		Dolomite, Limestone				

1197
OIL COMMISSION RECORDS, N. M.