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Form C-105
Revised 11-1-76

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL	
OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>
b. TYPE OF COMPLETION	
NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>

7. Unit Agreement Name
8. Farm or Lease Name
A.L. Christmas (NCT-1)

2. Name of Operator	
GULF OIL CORPORATION	
3. Address of Operator	
P. O. Box 670, Hobbs, New Mexico 88240	

9. Well No.
16
10. Field and Pool, or Wildcat
Tubb

4. Location of Well	
UNIT LETTER M	LOCATED 810 FEET FROM THE South LINE AND 710 FEET FROM
THE West LINE OF SEC. 18 TWP. 22-S RGE. 37-E NMPM	

11. County
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
10-14-77	10-25-77	4-5-78	3461' GL	-
20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By	23. Intervals Drilled By
6700'	6490'	Single	0' - 6700'	-

24. Producing Interval(s), of this completion - Top, Bottom, Name	
6286' - 6360' Tubb	
26. Type Electric and Other Logs Run	
Gamma Ray, Bulk Density	

25. Was Directional Survey Made
No
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"	24.0#	1129'	12-1/4"	500 sx - Circ	
5-1/2"	15.5#	6700'	7-7/8"	2035 sx - Circ	

29. LINER RECORD				30. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2-3/8"	6412'	6249'

31. Perforation Record (Interval, size and number)	
Perforate 5-1/2" casing with (2) 1/2" JHPF as follows: 6286-88', 6316-18' & 6358-60'	

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
6286' - 6360'	Acidize w/400 gals 15% NE iron stabilized HCl & frac with 19,000 gals gelled frac with 3/4# - 2-1/4# 20/40 SPG

33. PRODUCTION							
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)	
4-5-78		Pumping				Producing	
Date of Test	Hours Tested	Choke Size	Pressure For Test Period	Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
4-4-78	24	2" W.O.	95	95	-	50	-
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
-	-	95	95	-	50	36.3	

34. Disposition of Gas (Sold, used for fuel, vented, etc.)	Test Witnessed By
Sold	H. N. Hicks

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 Glyn Jones	TITLE Acting Area Engineer	DATE 07-24-78

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 30 days after the completion of any newly-drilled, deepened well. It shall be accompanied by one copy of all electrical and radioactivity logs run on the well and a summary of all special tests conducted, including drill stem tests. All data reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completion, Items 20 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except in state land, where six copies are required. See Rule 1165.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____ 1120 _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____ 1230 _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____ 2472 _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____ 2648 _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____ 2888 _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____ 3339 _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____ 3623 _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____ 3899 _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____ 5187 _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinbry _____ 5522 _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____ 6238 _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____ 6530 _____	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
0	1120		Anhydrite	5187	5522		Dolomite
1120	1230		Anhydrite	5522	6238		Dolomite & Sandstone
1230	2472		Salt	6238	6530		Dolomite & Limestone
2472	2648		Anhydrite, Sandstone, Shale, Limestone & Dolomite				
2648	2888		Dolomite, Anhydrite, Sandstone & Shale				
2888	3339		Dolomite, Sandstone, Anhydrite & Shale				
3339	3623		Sandstone & Dolomite				
3623	3899		Limestone & Dolomite				
3899	5187		Dolomite & Sandstone				

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CONSERVATION COMM.
N. M.

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TRANSPORTER	OIL	
	GAS	
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PRODUCTION 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-11
Effective 1-1-65

Operator Gulf Oil Corporation		CASINGHEAD GAS MUST NOT BE PRODUCED <u>6/4/78</u>	
Address P. O. Box 670, Hobbs, NM 88240		NO PAY EXCEPTION TO R-4070 IS OBTAINED.	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Request premission to temporarily	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Commingle the Tubb production with the	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Lease Drinkard production.	

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESCRIBED BELOW. IF YOU DO NOT CONCUR
WITH THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name A. L. Christmas (NCT-C)	Well No. 16	Pool Name, Including Formation Tubb	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter M ; 810 Feet From The South Line and 710 Feet From The West Line of Section 18 Township 22-S Range 37-E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Western Crude Inc	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1142, Midland, TX 79701	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, OK 74100	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? No When	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 10-14-77	Date Compl. Ready to Prod. 4-5-78	Total Depth 6700'		P.B.T.D. 6490'				
Elevations (DF, RAB, RT, GR, etc.) 3461' GL	Name of Producing Formation Tubb	Top Oil/Gas Pay 6286'		Tubing Depth 6412'				
Perforations 6286-6360' Tubb				Depth Casing Shoe 6700'				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		1129		500 sacks - circ			
7 7/8"	5 1/2"		6700'		735 sacks - circ			
	2 3/8"		6412'					

V. 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 4-4-78	Date of Test 4-4-78	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 145	Oil-Bbls. 95	Water-Bbls. 50	Gas-MCF -

36.3 corr gvty

GAS WELL

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

VI. 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.

H. P. Sikes, Jr.
(Signature)
Area Engineer
(Title)
4-5-78
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 6 1978, 19
BY [Signature]
TITLE **SUPERVISOR DISTRICT II**

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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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APR 4 - 1978

OIL CONSERVATION COMM.
WASH, D. C.