

DISTRIBUTION	
SANTA FE	
FILE	
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-104
Supersedes Old C-101 and C-1
Effective 1-1-65

Operator Gulf Oil Corporation		CASINGHEAD GAS MUST NOT BE TRANSPORTED 10/11/80 EXCEPT BY EXCEPTION TO R-4070 CONTAINED.	
Address P. O. Box 670, Hobbs, NM 88240			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☒	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	New Well	
Recompletion ☐			
Change in Ownership ☐			

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Laura J. May	Well No. 1	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter H ; 1830 Feet From The North Line and 480 Feet From The East Line of Section 27 Township 22S Range 37E , NMPM , Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, TX 79701	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit H	Soc. 27
	Twp. 22S	Rge. 37E
	Is gas actually connected? No When	

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

V. COMPLETION DATA

Designate Type of Completion — (X)	Oil Well ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Resv. ☐ Diff. Resv. ☐		
Date Spudded 5-13-80	Date Compl. Ready to Prod. 6-16-80	Total Depth 6700'	P.B.T.D. 6479'
Elevations (DF, RKB, RT, GR, etc.) 3335' GL	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6402'	Tubing Depth 6441'
Perforations 6402-04', 6424-26', 6440-42', 6457-59'			Depth Casing Shoe --

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8-5/8"	1150'	550
7-7/8"	5 1/2"	6700'	2100
	2-3/8" tbg	6441'	

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

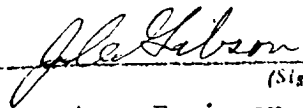
Date First New Oil Run To Tanks 6-16-80	Date of Test 8-4-80	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 42#	Casing Pressure 42#	Choke Size 2" WO
Actual Prod. During Test 62	Oil - Bbls. 37	Water - Bbls. 25	Gas - MCF 81

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

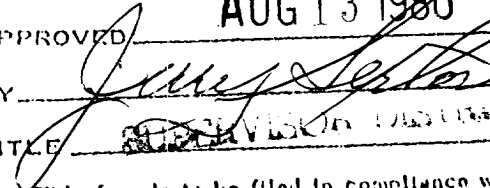
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Area Engineer
(Title)
8/11/80
(Date)

OIL CONSERVATION COMMISSION

AUG 13 1980

APPROVED _____, 19____

BY 
TITLE **SUPERVISOR**

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 daylight 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.