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PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)
Revised 7/1/57

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Kermit, Texas, January 2, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Gulf Oil Corporation

Federal Manager "D"

, Well No. 3, in 1/4, 1/4, 1/4, Pool

(Company or Operator)

(Lease)

Unassigned

Unit Letter
L

Sec. 11

T. 24 S

R. 32 E

NMPM.

County. Date Spudded 9-27-62

Date Drilling Completed 10-6-62

Elevation 3622.57

Total Depth 4986 PBD 4983

Top Oil/Gas Pay 4979'

Name of Prod. Form. Delaware

PRODUCING INTERVAL -

Perforations 4979' Notched

Open Hole None

Depth Casing Shoe 4982

Depth Tubing 4979

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 35 bbls. oil, 78 bbls water in 24 hrs, 0 min. Size 2"

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or sand: Acidized w/250 gal. 3000 gal 10, 1/104 minutes, 1 1/2 hrs

Casing 10 Tubing 10 Date first new oil run to tanks 12-22-62

The Permian Corporation, P. O. Box 4157, Midland, Texas

Oil Transporter

Vented

Gas Transporter

Remarks:

11.7 11.3

335/11

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved _____, 19 _____

Gulf Oil Corporation

ORIGINAL SIGNED BY (Company or Operator)

By: W. W. WHITAKER

(Signature)

Title: Area Engineer

Send Communications regarding well to:

Gulf Oil Corporation

Name: P. O. Box 980, Kermit, Texas

Address

OIL CONSERVATION COMMISSION

By: _____

Title _____