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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-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator Gulf Oil Corporation	
Address P. O. Box 670, Hobbs, NM 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Temporarily Request Permission to Surface Commingle Montoya & Ellenburger
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner See Correction

DESCRIPTION OF WELL AND LEASE				
Lease Name Lillie	Well No. 1	Pool Name, including Formation Montoya <u>Shut-in</u>	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter D	660	Feet From The North	Line and 330	Feet From The West
Line of Section 23	Township 24S	Range 37E	NMPM, Lea	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
The Permian Corporation		Box 3119, Midland, TX 79701		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas		Box 1492, El Paso, TX 79999		
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 23	Twp. 24S	Pge. 37E
			Is gas actually connected? Yes	When

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

COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well	Workover XX	Deepen	Plug Back XX	Same Res'v. XX	Diff. Res'v. XX
Date 5-22-80 10-5-80	Date Compl. Ready to Prod. 10-30-80	Total Depth 10,288'		P.B.T.D. 10,201'				
Elevations (DF, RKB, RT, GR, etc.) 3227' GL	Name of Producing Formation Montoya	Top Oil/Gas Pay 8664'		Tubing Depth 8786'				
Perforations 8664'-8770'				Depth Casing Shoe --				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
No New Casing								

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lost 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 10-30-80	Date of Test 11-18-80	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 40#	Casing Pressure 40#	Choke Size 2" W.O.
Actual Prod. During Test 11	Oil-Bbls. 4	Water-Bbls. 7	Gas-MCF TSTM

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

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.

RD Pater
(Signature)
Area Engineer
(Title)
11-20-80
(Date)

OIL CONSERVATION COMMISSION

APPROVED 150, 19 80

BY Jerry L. ...

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 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.