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NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

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

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 QUADRUPPLICATE 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.

Kernit, Texas

March 19, 1963

(Place)

(Date)

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

Gulf Oil Corporation

(Company or Operator)

Lillie

(Lease)

Well No. **3**

in **SW** $\frac{1}{4}$ **NW** $\frac{1}{4}$

Unit Letter **E**, Sec. **23**

T. **24-S**

R. **37-E**

NMPM, **Fowler Ellenburger**

Pool

Lee

12-19-62

County. Date Spudded **New Hole**

Date Drilling Completed **1-31-63**

Please indicate location:

Elevation **3224**

Total Depth **9765**

PBTD

Top Oil/Gas Pay **9650**

Name of Prod. Form. **Ellenburger**

PRODUCING INTERVAL -

Perforations **9650-60**

Open Hole **9710-9765**

Depth

Casing Shoe **9710**

Depth

Tubing **9537'**

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **93** bbls. oil, **10** bbls water in **9** hrs, **45** min. Choke Size **25/62**

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 Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **11,500 gal 15% NE Acid**

Casing Press. **425** Tubing Press. **425** Date first new oil run to tanks **March 17, 1963**

Oil Transporter **Shell Pipe Line**

Gas Transporter **El Paso Natural Gas Company**

Remarks: **Please set allowable at 86 BOEPD effective March 17, 1963.**

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

Approved: _____, 19____

Gulf Oil Corporation

(Company or Operator)

By: **M. M. Whitaker**

(Signature)

Title **Area Engineer**

Send Communications regarding well to:

Name **Gulf Oil Corporation**

Address **P. O. Box 980, Kernit, Texas**

OIL CONSERVATION COMMISSION

By: _____

Title _____

| | |
|-------------------|------------|
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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator **Gulf Oil Corporation** Lease **10 AM 10 18** Well No. **3**

Unit Letter **E** Section **23** Township **24 - S** Range **37 - E** County **Lee**

Pool **Fowler Ellenburger** Kind of Lease (State, Fed, Fee) **Fee**

If well produces oil or condensate give location of tanks Unit Letter ***** Section Township Range

Authorized transporter of oil ☒ or condensate ☐ Address (give address to which approved copy of this form is to be sent)
Shell Pipe Line Corporation **P. O. Box 1910, Midland, Texas**

Is Gas Actually Connected? Yes ☐ No ☒

Authorized transporter of casing head gas ☒ or dry gas ☐ Date Connected Address (give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company **P. O. Box 1384, Jal, New Mexico**

If gas is not being sold, give reasons and also explain its present disposition:

*** Producing in test tank at well pending laying of flow line.**

REASON(S) FOR FILING (please check proper box)

New Well ☒ Change in Ownership ☐
Change in Transporter (check one) Other (explain below)
Oil ☐ Dry Gas ☐
Casing head gas ☐ Condensate ☐

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **19** day of **March**, 19 **63**

OIL CONSERVATION COMMISSION

Approved by

Title

Date

By

Title

Company

Address

M. M. Whitaker

Area Engineer

Gulf Oil Corporation

P. O. Box 980, Kermit, Texas