

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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

I. Operator
Address **Gulf Oil Corporation**
P. O. Box 980, Kermit
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☒ **Dual** Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain) **Plug Montoya, dual complete as Fusselman-Blinbry**
If change of ownership give name and address of previous owner ---

II. DESCRIPTION OF WELL AND LEASE

Lease Name Learcy McBuffington	Well No. 9	Pool Name, Including Formation Justis (Blinbry)	Kind of Lease State, Federal or Fee Fee
Location Unit Letter K ; 1980 Feet From The West Line and 1650 Feet From The South	Line of Section 13 , Township 25-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"/> Texas-New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79704	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1384, Jal, New Mexico 88252	
If well produces oil or liquids, give location of tanks. Unit N Sec. 13 Twp. 25S Rge. 37-E	Is gas actually connected? Yes	When Unknown

If this production is commingled with that from any other lease or pool, give commingling order number: **PG-283 1-3-65**

IV. COMPLETION DATA

Designate Type of Completion - (X) X	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/> Same Res'tv. <input type="checkbox"/> Diff. Res'tv. <input checked="" type="checkbox"/>
Date Spudded 6-28-58	Date Compl. Ready to Prod. 8-30-67	Total Depth 7100'	P.B.T.D. 6890'
Pool Justis (Blinbry)	Name of Producing Formation Blinbry	Top Oil/Gas Pay 4960'	Tubing Depth 5412'
Perforations 4990-92', 5278-80', 5402-04'		Depth Casing Shoe 7100'	
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	419'	450
12-1/4"	9-5/8"	3449'	1828
8-3/4"	7" & 7-5/8"	7100'	735
	2-3/8" Tubing	5412' (Dual-short string)	

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 8-30-67	Date of Test 10-26-67	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 881	Casing Pressure --	Choke Size 15/64"
Actual Prod. During Test 24	Oil-Bbls. 21	Water-Bbls. 3	Gas-MCF 686

Flow to Test: Produced 160 BO in September & 252 BO in October - total 412 BO.

Actual Prod. Test-MCF/D	Length of Test	Ebbs. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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 is true and complete to the best of my knowledge and belief.

C. E. Fidler
(Signature)
Area Engineer
(Title)

October 30, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
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 Sections I, II, III, and VI only 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.