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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104
Revised 7/1/57

REQUEST FOR OIL WELL () FILE

Well Name
Recompletion

This form shall be submitted by the owner or before an unit at allowable well completion or recompletion. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office in which the well was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion. The term "allowable" shall mean the calendar month of completion or recompletion. The completion date shall be the date on which the well is first put to work and new oil is delivered into the stock tank. Gas must be reported on 100% basis at 60° Fahrenheit.

Kermit, Texas

August 28, 1962

(Place)

(Date)

WE ARE REQUESTING AN ALLOWABLE FOR A WELL IN

Gulf Oil Corporation, Vinson Ramsay "B"

Well No. 10

SW

SE

Company or Operator

(Lease)

0

Sec. 36

T. 25S

R. 37E

NMPM.

Justis

Unit Letter

Lea

County Date Spudded 7-2-62

Date Drilling Completed 7-22-62

Elevation 3026.9

5885 5853

Please indicate location

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Top Oil/Gas Pay 5232

Blinebry

PRODUCING INTERVAL -

Perforations 5232-40, 5272-76, 5306-10

Open Hole None

Depth

5885

5203

OIL WELL TEST -

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

Test after Acid or Fracture Treatment (Give amount of acid used, volume of oil used, volume of

load oil used): 61 bbls./oil, 16 hrs, 24 min. Size 13/64

GAS WELL TEST -

Natural Prod. Test: MCF/day, hrs flowed, min. Size

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

Test After Acid or Fracture Treatment: MCF, hrs flowed

Shoke Size Method of Testing

Acid or Fracture Treatment (Give amount of acid used, volume of oil used, volume of load oil used): 750 gal acid & 4000 gal fracture treatment

Casing 2400# Tubing 2400# Date first run 8-9-62

Oil Transporter Texas - New Mexico Pipe Line Company

Gas Transporter El Paso Natural Gas Company

Remarks: Please Make allowable effective 8-23-62

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

OIL CONSERVATION COMMISSION

By: [Signature]

By: [Signature]

Signature

Area Clerical Supervisor

Title: Send Communications regarding well to:

Gulf Oil Corporation

Name:

Title:

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