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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-101 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 ☒	New well
Recompletion ☐	
Change In Ownership ☐	
Change In Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE				
Lease Name Arnott-Ramsay NCT-E	Well No. 8	Pool Name, Including Formation Langlie Mattix	Kind of Lease State, Federal or Fee State	Lease No. B-229
Location				
Unit Letter I	: 1980	Feet From The South	Line and 660	Feet From The East
Line of Section 16	Township 25-S	Range 37-E	NMPM, Lea	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil ☒ or Condensate ☐ The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas 79701					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 1384, Jal, NM 88252					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 16	Twp. 25-S	Pge. 37-E	Is gas actually connected? Yes	When 10-5-77

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 ☒ Gas Well ☐ New Well ☒ Workover ☐ Deepen ☐ Plug Back ☐ Same Res't. ☐ Diff. Res't. ☐		
Date Spudded 9-7-77	Date Compl. Ready to Prod. 9-28-77	Total Depth 3700'	P.B.T.D. 3682
Elevations (DF, RKB, RT, GR, etc.) 3099' GL	Name of Producing Formation Queen	Top Oil/Gas Pay 3382'	Tubing Depth 3328'
Perforations 3382'-3484'			Depth Casing Shoe 3700'

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	346'	225 sacks-circ
7 7/8"	5 1/2"	3700'	1375 sacks-circ
	2 3/8"	3328'	

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of liquid 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 9-28-77	Date of Test 10-4-77	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 10 hr	Tubing Pressure 300#	Casing Pressure --	Choke Size 20/64"
Actual Prod. During Test 179	Oil - Bbls. 157	Water - Bbls. 22	Gas - MCF --
Corr Gvty 33.2			

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

I. 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.

N. P. Sikes, Jr.
(Signature)
Area Engineer
(Title)
10-5-77
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY [Signature]

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 deviated points taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.