

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

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"/>	Change In Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name S. J. Carr	Well No. 7	Pool Name, Including Formation Fowler Upper Yeso	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter K	1650	Feet From The West	Line and 2100	Feet From The South
Line of Section 10	Township 24S	Range 37E	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"/>	Address (Give address to which approved copy of this form is to be sent)	
Texas New Mexico Pipeline	P. O. Box 1510, 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 Co	P. O. Box 1384, Jal, NM 88252	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
		Is gas actually connected? When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
XX						X X		
Date Spudded 4-19-78 (Plug back)	Date Compl. Ready to Prod. 4-23-78	Total Depth 7635'	P.B.T.D. 7418'					
Elevations (DF, R&B, RT, GR, etc.) 3267' GL	Name of Producing Formation Fowler	Top Oil/Gas Pay 5267'	Tubing Depth 5576'					
Perforations 2-1/2" - 2-1/2"			Depth Casing Shoe 7635'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. 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 4-23-78	Date of Test 5-2-78	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hrs	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 251	Oil-Bbls. 26	Water-Bbls. 225	Gas-MCF -

37.8 gvtv

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

VI. 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.

H. B. Liles Jr.
(Signature)
Area Engineer

(Title)
5-3-78

(Date)

OIL CONSERVATION COMMISSION

APPROVED *MAY 1 1978*, 19
BY *John W. Runyan*
TITLE *General*

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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.