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PRODUCTION OFFICE	<u>1</u>
OPERATOR	<u>1</u>

NEW MEXICO OIL CONSERVATION COMMISSION (Form C-104)  
Santa Fe, New Mexico. Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

MAR 20 1961 New Well  
RECEIVED

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 QUADRUPLICATE to the same District Office to which Form C-104 was filed. 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.

Hobbs, New Mexico  
(Place)

March 17, 1961  
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS

Skelly Oil Company

Dev "A"

Well No. 7

in NW 1/4 SW 1/4

(Company or Operator)

(Lease)

Unit Letter

Eddy

Sec 15

T 17-S R 31-E

NMPM

Grayburg Jackson

Pool

County. Date Spudded Jan. 30, 1961

Date Drilling Completed March 10, 1961

Please indicate location:

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

Section 15

1980' FSL & 660' FWL

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	SAC
8-5/8"	Set At 722'	125
5-1/2"	3619'	375
2"	3516'	—

Elevation 3868' DF

Total Depth 3714'

PBTD —

Top Oil/Gas Pay 3621'

Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations —

Open Hole 3619-3714'

Depth

Casing Shoe 3619'

Depth

Tubing 3516'

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 320 bbls. oil, 0 bbls water in 24 hrs, — min. Size 3/4"

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): Treated w/ 1411 bbls. Loe. oil, 30,000# sand & 1500 gals. acid.

Casing Press. 0# Tubing Press. 100# Date first new oil run to tanks March 17, 1961

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter Skelly Oil Company

Remarks:

Well flowed 320 bbls. of oil in 24 hrs. through 3/4" choke, T.P. 100#.

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

Approved MAR 20 1961, 19

Skelly Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

(Signature)

Dist. Supt.

Title

(Send Communications regarding well to:

Skelly Oil Company

Name

Box 38 - Hobbs, New Mexico

By: M.L. Armstrong  
OIL AND GAS INSPECTOR

NUMBER OF COPIES RECEIVED <b>5</b>	
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TRANSPORTER	<b>1</b>
OIL GAS	
PRODUCTION OFFICE	
OPERATOR	

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)

MAR 20 1961

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Dow "A"</b>	
Unit Letter <b>"L"</b>	Section <b>15</b>	Township <b>17-S</b>	Range <b>31-E</b>	County <b>Bddy</b>	
Pool <b>Grayburg Jackson</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>	
If well produces oil or condensate give location of tanks		Unit Letter <b>"G"</b>	Section <b>15</b>	Township <b>17-S</b>	Range <b>31-E</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Texas-New Mexico Pipe Line Company</b>			Address (give address to which approved copy of this form is to be sent) <b>Box 1510 - Midland, Texas</b>		
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> <b>Skelly Oil Co. - Maljamar Gasoline Plant</b>		Date Connected <b>3/17/61</b>	Address (give address to which approved copy of this form is to be sent) <b>Box 207 - Loco Hills, New Mexico</b>		

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

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 **17th** day of **March**, 19 **61**.

OIL CONSERVATION COMMISSION		By
Approved by <b>ML Armstrong</b>		<b>Dist. Supt.</b>
Title <b>OIL AND GAS INSPECTOR</b>		Company <b>Skelly Oil Company</b>
Date <b>MAR 20 1961</b>		Address <b>Box 38 - Hobbs, New Mexico</b>