NO. OF COPIES REC	2				
DISTRIBUTION					
SANTA FE					
FILE	1	-			
U.S.G.S.					
LAND OFFICE					
TRANSPORTER	OIL	7			
TRANSPORTER	GAS	1			
OPERATOR		1			
PROBATION OFFICE					

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

	U.S.G.S.		AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				Effective 1-1-65		
	LAND OFFICE				OTHORIZATION TO TR	AND ON FOIL AND	NATURAL G	ASIX E L E J V	VED
	TRANSPORTER	OIL GAS	/	-				JAN 261	በሮማ
	OPERATOR		<i>i</i>					AUDI C D 11	967
I.	PRORATION OFFIC	E						Early Early	
	Skeily Oil (	Compa	eny					ARTERIA, CIT	line .
	Box 730, Ho	he	No.	Marrie e	~				
	Reason(s) for filing (Ch	eck pro	per box	1455 24 246	<u> </u>	Other (Pleas	se explain)		
	New Well	]		Cho	ange in Transporter of:		,		
	Recompletion	]		011	Dry G	as [			
	Change in Ownership	<u> </u>		Cas	singhead Gas Conde	ensate 🔲 🕻 enge	Lease Name	and Well No.	
	If change of ownership and address of previou	give i	name er	Well	for erly kasson a				
II.	DESCRIPTION OF V	WELL	AND		Skelly 30 30 5		"A" Well He		Lease No.
	Skelly Unit				57 Grylm gal	17: 4 C & SA	State, Federal	1 1	Ledse No.
	Location						<u> </u>		ļ
	Unit Letter	• ;	66	D Fe	et From The South Li	ne and 1980	Feet From T	he Rest	
	-						rectriom r	ne	
	Line of Section	22	Tov	wnship	Range	, NMPI	M, Sady		County
***									
111.	Name of Authorized Train	rrans	SPORT	FER OF	or Condensate		to which approx	ed copy of this form is to	
	Texas - Sea				_	How (510 - Mi			be sent)
	Name of Authorized Tran			-		1		ed copy of this form is to	he centl
	Skelly Oil					Ton 1135 - Curice, New			
	If well produces oil or li			Unit	Sec. Twp. P.ge.	Is gas actually connec			
	give location of tanks.	iquiub,		HAH	22 14 2512	ins:	į	1	
	If this production is co COMPLETION DATA		led wit	th that fro	om any other lease or pool,	give commingling orde	er number:		
	Designate Type o	of Corr	nnletio	n – (X)	Oil Well Gas Well	New Well Workover	Deepen	Plug Back   Same Res!	v. Diff. Res'v
				T= -		<u> </u>	1		<u>.</u>
	Date Spudded			Date Cor	mpl. Ready to Prod.	Total Depth		P.B.T.D.	
	Elevations (DF, RKB, R)	T CD		Name of	Producing Formation	Top Oil/Gas Pay			
	= 10 various (D1 , RRD, R.	1, GA,	etc.j	Nume of	Producing Formation	Top On/Gas Pay		Tubing Depth	
	Perforations	<del></del>		L		1		Depth Casing Shoe	
					TUBING, CASING, AN	D CEMENTING RECOR	₹D		
	HOLE SIZ	E		CA	SING & TUBING SIZE	DEPTH S	ET	SACKS CEME	ENT
	<del></del>		<u> </u>						
			<del></del>	1				- <del> </del>	
	<del></del>			L		<u> </u>			
	TEST DATA AND RI OIL WELL	EQUE	ST FO	OR ALL		fter recovery of total voluments for be for full 24 hours	ime of load oil ar	nd must be equal to or ex	ceed top allow
Ī	Date First New Oil Run	To Tan	ks	Date of 7		Producing Method (Flor		etc.)	
								,	
ŀ	Length of Test			Tubing P	ressure	Casing Pressure	<del></del> 1	Choke Size	
ľ	Actual Prod. During Test	t		Oil - Bbls	l.	Water-Bbis.		Gas - MCF	
r	GAS WELL					T-22-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
	Actual Prod. Test-MCF/	/D		Length o	f Test	Bbls. Condensate/MMC	F	Gravity of Condensate	
-	Testing Method (pitot, ba	ack ne l	1	Tubing D	ressure (Shut-in )	Casing Pressure (Shut	-4-1		
	restrict Method (pinot, or	#C# p/1/	<b>'</b>	I ubing P	tasama (. Sunt-III.)	Cosing Pressure (Sauce	-18)	Choke Size	
ا 171 م	CERTIFICATE OF C	OVDI	T T A NICO						
¥1. (	CERTIFICATE OF C	UMPl	LIANC	ie.		OIL	CONSERVAT	TON COMMISSION	
	h	1		1 . 4 !	£ .	APPROVED		.1 √ S.20 ± •	•
(	Commission have been	mereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given			APPROVED, 19				
ε	pove is true and complete to the best of my knowledge and belief.			BY U. U. WESSETT					
		1		<sub>e</sub> a		TITLE	~A [ ] . [ ]	rain Berk (	
		J.	į	<b>f</b>	i	III LE			
	THE YEAR	THE COME				This form is to be filed in compliance with RULE 1104.  If this is a request for allowable for a newly drilled or deepened			
-		(Signature)				well, this form must	be accompani-	ed by a tabulation of t	or deepened the deviation
	transfer to the	The state of the second of the state of the					well in accorda	ance with RULE 111.	
-			(Titl	e)		All sections of	this form must	be filled out complete	ly for allow-

(Date)

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.