

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

FEB 2 1977

TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
PERFORATION OFFICE		1

I. OPERATOR

Gettly Oil Company ✓

Address

P. O. Box 1351, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐

Recompletion ☐ Casinghead Gas ☐ Condensate ☐

Change in Ownership ☒

Other (Please explain)

Skelly Oil Company merged with Gettly Oil Company effective 1-31-77

If change of ownership give name and address of previous owner

Skelly Oil Company, P. O. Box 1351, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Skelly Unit

Well No.: 72

Pool Name, including Formation: Grayburg Jackson (SR.Q.G.SA)

Kind of Lease: State (Federal or Fee)

Location: Unit Letter K; 1980 Feet From The South Line and 1980 Feet From The West

Line of Section 23 Township 17S Range 31E, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil (X) or Condensate

Texas-New Mexico Pipeline Company

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 1510, Midland, Texas 79702

Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas

Continental Oil Company

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 2197, Houston, Texas 77001

If well produces oil or liquids, give location of tanks.

Unit H Sec. 28 Twp. 17S Rge. 31E

Is gas actually connected? Yes

When December 12, 1961

IV. COMPLETION DATA

Designate Type of Completion - (X)

Oil Well Gas Well New Well Workover Deepen Plug Back Same Res. Diff. Res.

Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.

Elevations (DF, RKB, KT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth

Perforations Depth Casing Shoe

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 Date of Test Producing Method (Flow, pump, gas lift, etc.)

Length of Test Tubing Pressure Casing Pressure Choke Size

Actual Prod. During Test Oil-Bbls. Water-Bbls. Gas-MCF

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.

(SIGNED) LELAND FRANZ

Signature Leland Franz

District Production Manager

February 1, 1977

Date

OIL CONSERVATION COMMISSION

APPROVED FEB 9 1977

BY W. A. Grasset

TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1107.

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.