

DISTRIBUTION	7
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FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	3
PRODUCTION 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-111
Effective 1-1-65

Operator
Getty Oil Company
Address
Box 3360, Casper, WY 82602
Recipient(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Condensed Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner **Skelly Oil Company, Box 3360, Casper, WY 82602**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Farming "E"	Well No. 3	Prop. Name, Including Formation Otero Gallup	Kind of Lease State, Federal or Free State	Lease No. E 1207
Location Unit Letter K : 1850 Feet From The South Line and 1750 Feet From The West				
Line of Section 2 Township 24N Range 6W , N.M.P.M. Pio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 108, Farmington, NM 87401	
Name of Authorized Transporter of Condensed Gas ☐ or Dry Gas ☒ El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 990, Farmington, NM 87401	
If well produces oil or liquids, give production in barrels: Unit 6 Sec. 2 Twp. 24N Rge. 6W	Is gas actually condensed? yes	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.	Date Completed	Date of Appl. Entry to Prod.	Total Depth	P.B.T.D.
Drill Log, L.P.L.F., P.A.D., R.T., G.R., etc.	Name of Drilling Formation	Top Oil/Gas Pay	Testing Depth	Depth Coring 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 initial volume of load oil and must be equal to or exceed top oil allowable for this depth or be for full 24 hours)

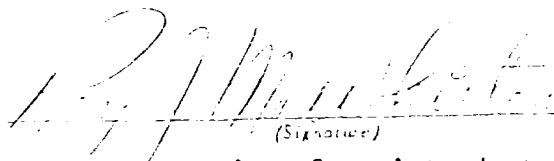
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Flowing Pressure	Casing Pressure	Cable Size
Actual First Flowing Test	Oil Rate	Water Rate	Gas-MCF

GAS WELL

Actual First Test - MCF/D	Length of Test	Rate, Condensate/MCF	Gravity of Condensate
Testing Method (pump, rock pr.)	Flowing Pressure (shot-in)	Casing Pressure (shot-in)	Cable 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.


(Signature)
Area Superintendent
(Title)
2/9/77
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **CHAS. W. WATKINS, JR.**
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 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 transportation or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.