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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-110
Effective 1-1-65

Operator		Getty Oil Company	
Address		Box 3360, Casper, WY 82602	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	☐	Change in Transporter of:	
Recompletion	☐	Oil	☐
Change in Ownership	☒	Condensate Gas	☐
		Dry 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	Well No.	Prop. Name, including Formation	Kind of Lease	Lease No.
Farming "E"	1	Basin Dakota	State, Federal or Fee State	E 1207
Location				
Unit Center	A	769	Feet From The North	Line and 769
			Feet From The East	
Line of Section	2	Township	24N	Range
			6W	N.M.P.M.
			Rio Arriba	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)	
Plateau, Inc.	Box 108, Farmington, NM 87401	
Name of Authorized Transporter of Condensate Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Co.	Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	A	2
	24N	6W
	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 Basin	Drill. Basin
Date Spudded	Date Complet. Ready to Prod.		Total Depth		R.B.T.D.			
Drill. Log (LF, ABE, KE, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Casing Depth		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 REEL

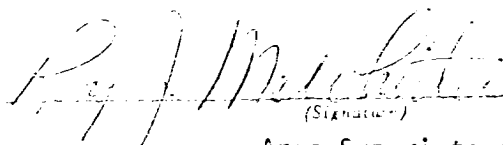
(Test must be after recovery of total volume of lead oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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
Amount Produced During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (float, back pt.)	Tubing Pressure (psi-in)	Casing Pressure (psi-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.

Area Superintendent

(Title)

2/9/77

(Date)

OIL CONSERVATION COMMISSION

APPROVED

ORIGINAL SIGNED BY N. E. MAXWELL, JR.

BY PETROLEUM ENGINEER INST. NO. 3

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 allow-
able 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.