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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-11
Effective 1-1-65

B.K.

Operator Getty Oil Company		
Address Box 3360, Casper, WY 82602		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name C.W. Roberts	Well No. 5	Prop. Name, Including Formation Gallup & Dakota <i>Commingled</i>	Kind of Lease State, Federal or Fee SF	Lease No. 079600
Location Unit Letter F ; 1650 Feet From The West Line and 1850 Feet From The North				
Line of Section 17 Township 25N Range 3W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> 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 Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 2185 American General Bldg, Houston, TX			
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 17	Twp. 25N	Pge. 3W
Is gas actually connected?				When 7/7001

If this production is commingled with that from any other lease or pool, give commingling order number: R-5500

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 1/1/77	Date Compl. Ready to Prod. 1/31/78		Total Depth 8210'		P.S.T.D. 8068'			
Elevations (DF, RKB, RT, GR, etc.) 7172' G.R.	Name of Producing Formation Gallup H & J Dakota Sands		Top Oil/Gas Pay 7010' 7884'		Tubing Depth 8032'			
Perforations 7010-20'; 7040-50'; 7074-90'; 7148-94'; 7234-46'; 7884-94'; 8028-40'; 8102-10'; 8115-17'; 8119-24'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	10-3/4" O.D.		344'		335			
8-3/4"	7" O.D.		8200'		875			
	2-3/8" O.D.		8032'					

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 1/31/78	Date of Test 1/31/78	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 250	Casing Pressure 290	Choke Size 18/64
Actual Prod. During Test	Oil - Bbls. 20	Water - Bbls. 1	Gas - MCF 97 MCF

40 A + 40 A - per oil
GAS WELL
Bal 90% oil
Bal 10% gas

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

[Signature]
(Signature)
Area Superintendent
(Title)
February 7, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, IS _____
BY _____
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 transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.