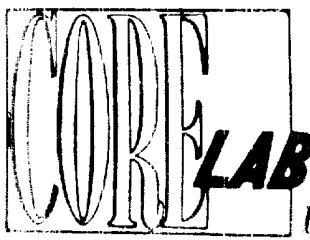


CORE LABORATORIES, INC.



Petroleum Reservoir Engineering

COMPANY GEMTY OIL COMPANY FIELD BASIN DAKOTA FILE RP-3-3034
WELL JICARILLA P 20-E COUNTY RIO ARriba DATE 11-7-80
LOCATION NW SW SEC 31-25N-5W STATE NEW MEXICO ELEV. 6777'KB

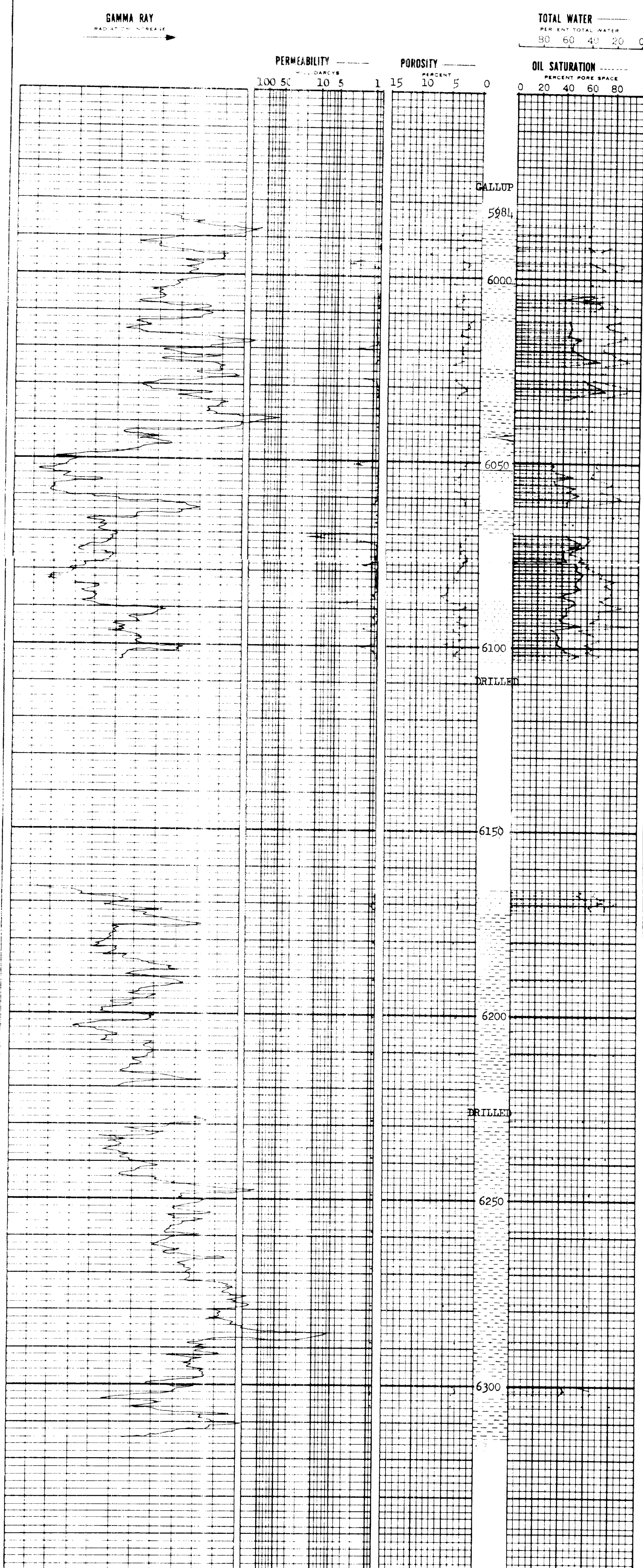
CORE-GAMMA CORRELATION

This report is based on the data furnished by the well owner and is not to be used for any purpose other than that for which it was prepared. The well owner is responsible for the accuracy of the data furnished and for the results of the correlation. The well owner is also responsible for the accuracy of the data furnished and for the results of the correlation.

VERTICAL SCALE: 5" = 100'

CORE-GAMMA SURFACE LOG

COREGRAPH



INTERPRETATION OF DATA

5985.0-6306.0 Feet - Intervals analyzed believed to be non-productive due to low permeability.

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This is a summary of the data furnished by the well owner and is not to be used for any purpose other than that for which it was prepared. The well owner is responsible for the accuracy of the data furnished and for the results of the correlation. The well owner is also responsible for the accuracy of the data furnished and for the results of the correlation.

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

B.K.

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. PRODUCTION OFFICE	
Operator	
Getty Oil Company	
Address	
P.O. Box 3360, Casper, Wyoming 82602	
Reason(s) for filing (Check proper box)	
New Well ☒	Change in Transporter of:
Recompletion ☐	Oil ☐
Change in Ownership ☐	Casinghead Gas ☐
	Dry Gas ☐
	Condensate ☐
Other (Please explain)	
Dual Completion	
Commingle Order Pending	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Jicarilla B	20 E	Otero Gallup & Basin Dakota	XXXX Federal XXXX Federal	68
Location				
Unit Letter <u>L</u> ; <u>1830</u> Feet From The <u>South</u> Line and <u>790</u> Feet From The <u>West</u>				
Line of Section <u>31</u> Township <u>25N</u> Range <u>5W</u> , NMPM, <u>Rio Arriba</u> 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 Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas	Box 990, Farmington, NM 87401			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	L	31	25N	5W
	Is gas actually connected?		When	
	No		As soon as possible	

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

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 Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
10-21-80	2-3-81		7150'		7115'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil XXX Pay		Tubing Depth With Sliding			
6762' GR	Gallup		5994' Oil		7029' Sleeve @ 6107'			
Perforations	Gallup 5994'-6310'		Packer @ 6450'		Depth Casing Shoe			
	Dakota 7029'-7096'				7153'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8" 24#		326'		225			
7 7/8"	5 1/2" 14 & 15.5#		7153'		2483			

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL Gallup Test

(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.)	
1-23-81	2-10-81	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
3 hours	48	48	3/4"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
2 BO & 11 MCF	CAOF 10 BOPD	0	CAOF 90-MCFPD

GAS WELL

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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Charles E. Mooney
(Signature)Area Engineer
(Title)

2-19-81

(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 30 1981, 19BY Original Signed by FRANK T. CHAVEZTITLE SUPERVISOR DISTRICT #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 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.

