

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. PRORATION OFFICE	
Operator	
Getty Oil Company	
Address	
P.O. Box 3360, Casper, WY 82602	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	
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.
C.W. Roberts	6	Ojito Gallup-Dakota	<del>XXXXXX</del> Federal	SF 079600
Location				
Unit Letter <u>G</u> ; <u>1840</u> Feet From The <u>North</u> Line and <u>1730</u> Feet From The <u>East</u>				
Line of Section <u>18</u> Township <u>25N</u> Range <u>3W</u> , NMPM, <u>Rio Arriba</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)					
Plateau Incorporated	P.O. Box 26251, Albuquerque, New Mexico 87125					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P.O. Bo 990, Farmington, New Mexico 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	18	25N	3W	No	--

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.
		X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
6-30-81	10-29-81		8150'		8106'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation (Comingled Downhole)		Top Oil/Gas Pay		Tubing Depth				
7103' GL 7115' KB	Gallup-Dakota		6940'		7658'				
Perforations				Depth Casing Shoe					
6940' - 7988' Gallup-Dakota				8150'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	9 5/8" 32#		293'		300 sx.				
8 3/4"	7" 23#		6160'		1100 sx.				
6 1/4"	4 1/2" Liner 11.6#		8150'		370 sx.				
--	2 3/8" 4.7#		7658'		--				

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)

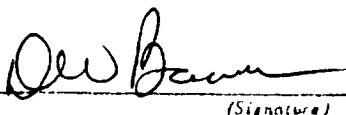
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
--	11/16/81	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
3.25 hours	200#	Packer	24/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	35 BO	26 BW	495 MCFD

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

I. 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.



Area Superintendent  
(Title)

12/7/81

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 9 1981, 19

Original Signed by FRANK T. CHAVEZ

BY

TITLE 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.