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	SANTA FE					Į			
	FILE								
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	LAND OFFICE					1			
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1.		G	A S						
	OPERATOR]			
	PROBATION OFFICE]			
•.	Operator								
	Getty Oil Compar								
	Address					_			
	Р.	0.	Во	x 3	360				
	Reason(s) for filing (Check proper box)								
	New Well								
	Recompletion								
	Change in Ownership								
	If change of owners and address of prev	hip ious	give s ow	ner_	ne ——				
17.	DESCRIPTION OF WELL AND LE								
	Federal 3S	Federal 3S Comm							

	DISTRIBUTION SANTA FE FILE		CONSERVATION COM- FOR ALLOWABLE AND	•	Form C-104 Supersedes Old C-104 and C- Elfective 1-1-65				
	.U.S.G.S. LAND OFFICE	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL GAS						
	IRANSPORTER GAS	1	_						
	PROBATION OFFICE	4							
1.	Operator								
	Getty Oil Company								
	P. O. Box 3360 Casper, Wyoming 82602								
	Reason(s) for filing (Check proper box) New West X Change in Transporter of:								
	New We!! Recompletion Change in Ownership	Oil Dry Ga Casinghead Gas Conder			· 	· · · · · · · · · · · · · · · · · · ·			
	If change of ownership give name and address of previous owner								
17.	DESCRIPTION OF WELL AND	ESCRIPTION OF WELL AND LEASE. Well No.: Pool Name, Including Fo			· · · · · · · · · · · · · · · · · · ·	Lease No.			
	Federal 3S Comm		Fee Federal	SF-78935					
	Unit Letter J : 1715	Feet From The South Lin	e and <u>2310</u>	Feet From The	East				
	Line of Section 3 To	waship 27N Range 12	2W , NMPA	. San Juan		County			
ш.	DESIGNATION OF TRANSPOR	or Condensate X	Address (Give address			o be sent)			
	Permian Corporation	singhead Gas or Dry Gas X	P. O. Box 3119 Midland, TX Address (Give address to which approved copy of this form is to			o be sent)			
	El Paso Natural Gas		P. O. Box 990, Farmington, NM 8			401			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connect Yes		-14-81				
	If this production is commingled wi	1 0 1 1 1	give commingling orde	r number:					
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover		Plug Back Same Res	v. Diff. Rest			
	Designate Type of Completic		X Total Depth		P.B.T.D.				
	Date Spudded	Date Compl. Ready to Prod. 8-30-80	6295		6220				
	6-27-80 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	7	Subing Depth				
	5890 KB 5878 GR	Dakota	6124		6140 Depth Casing Shoe				
	6124'-42' 18 sho	ts 6164'-75' 11 sho							
		TUBING, CASING, AND	DEPTH S		SACKS CEM	ENT			
	12 1/4"	8 5/8"	293'		275 sacks				
	7 7/8"	5 1/2"	6295 ' 6140'		1620 sacks				
		2 3/8"	6140						
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to able for this depth or be for full 24 hours)									
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flor	v. pump, gas lift.	AFILES				
		Tubing Pressure	Casing Pressure	- /a					
	Length of Test	Inplud Lippe		(1 1 1	1003				
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.		JUN 22 1981				
			1	OIL	DIST. 3				
	GAS WELL	Length of Test	Bbls. Condensate/MMC	F	Gravity of Communicate				
	Actual Prod. Test-MCF/D 2010	3 hours	8		48				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	(at-	Choke Size 3/4"				
	BP COURT IAN	1518		CONSERVAT	ION COMMISSION	٧			
VI.	CERTIFICATE OF COMPLIAN	regulations of the Oil Conservation	JUN 4 - 1981						
	Commission have been compiled whove is true and complete to the	vith and that the injormation given	BYOrigin	al Signed by FRA	INK I. CHAVEZ				
		i	TITLE	E ATTENDED					
	al Dom	01 0 000 111-			npliance with NULE	1104.			
	Charles & M.	my 6/2/8/	H /	If this is a request for allowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviation					
	, ,	nime!	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow						
	Area Engineer (Ti	ile)	ll able on new and recompleted wells.						
	6-2-81	nte)	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						

well name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filed for each pool in multiple completed wells.