

OIL CONSERVATION COMMISSION
REGULATIONS FOR OIL AND NATURAL GAS

Form O-104
Supersedes O-104
1-1-75

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PROPERTY	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator
SHELL OIL COMPANY

Address
P. O. BOX 991, HOUSTON, TX 77001

Reason(s) for filing (Check proper box)

New Well <input type="checkbox"/>	Change in Transporter of Oil <input type="checkbox"/>	Other (Please explain) FORMERLY: B HARDIN #2
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner
GETTY OIL COMPANY, P. O. BOX 1231, MIDLAND, TEXAS 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name N. Hobbs (G/SA) Unit Sec 19	Well No. Pool Name, including Formation 421 Hobbs G/SA	Kind of Lease SIX MONTHS Fee Fee
Location Unit Letter H : 2310 Feet From The north Line and 1305 Feet From The east	Line of Section 19 Township 18S Range 38E NMPM, Lea	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> SHELL PIPELINE	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1910, MIDLAND, TEXAS 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PIPELINE	Address (Give address to which approved copy of this form is to be sent) 4001 PENBROOK ODESSA, TEXAS 79762
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When YES NA

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 <input type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same as last
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
Perforations	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 WELL (Test must be after recovery of total volume of lead oil and must be equal to or greater than 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	Testing Pressure	Casing Pressure	Coke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Coke 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.

A. J. Fore
A. J. FORE, SENIOR ENGINEERING TECHNICIAN

JANUARY 25, 1980

OIL CONSERVATION COMMISSION

FEB 1 1980

APPROVED _____

BY *Jerry Sexton*
Jerry Sexton
Dist. 1, Supv.

TITLE _____

This form is to be filed in compliance with RULE 11. If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely on new and re-completed wells. Fill out only Sections I, II, III, and VI for each well name or number, or transporter, or other such change.