

REGISTRATION OF TRANSPORT OF OIL AND NATURAL GAS

TRANSPORTER OF OIL OR GAS	OIL GAS
OPERATOR	
REGISTRATION OFFICE	

Operator
Getty Oil Company
Address
P. O. Box 1351, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Skelly Oil Company merged with Getty Oil Company effective 1-31-77
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input checked="" type="checkbox"/>	
		Dry Gas	<input type="checkbox"/>	
		Condensate	<input type="checkbox"/>	

If change of ownership give name and address of previous owner **Skelly Oil Company, P. O. Box 1351, Midland, Texas 79702**

II. DESCRIPTION OF WELL AND LEASE

Lease Name J. V. Baker	Well No. 9	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Lease
Location Unit Letter N ; 766 Feet From The South Line and 2086 Feet From The West			
Line of Section 22 Township 22S Range 37E , NMPM, Lea 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"/> Shell Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) Box 2648 Houston, Tx. 77001			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Getty Oil Co.	Address (Give address to which approved copy of this form is to be sent) Box 1135 Eunice, N.M. 88231			
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 22	Twp. 22S	Rge. 37E
	Is gas actually connected? Yes		When Unknown	

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	Some Restv.	OTH. Re
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKL, RT, CR, 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 (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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke 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 (prior, back pr.)	Tubing Pressure (inlet-in)	Casing Pressure (inlet-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) **Leland Franz**
District Production Manager
(Date) **February 1, 1977**

OIL CONSERVATION COMMISSION

APPROVED _____, 1977

BY _____
Original Signed by
Leland Franz
Geologist

TITLE _____

This form is to be filed in compliance with RULE 1104.
If this is a request for oil and gas for a newly drilled or deepened well, this form must be accompanied by a tabulation of the gas/liquid tests taken on the well in accordance with rule 111.
All sections of this form must be filled out completely for all wells on new and existing leases.
Fill out only Sections I, III, IV, and V, for change of owner.

RECEIVED

FEB 2 1977

U.S. AIR FORCE COMM.
WHEELS, N. M.