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-	DISTRIBUTIO	ON				
r	SANTA FE				and the second	
l	FILE					
t	U.S.G.S.					AUT
r	LAND OFFICE					
	TRANSPORTER	OIL GAS				
L	OPERATOR					
	PRORATION OF	FICE				
	Operator	Getty	Û.	aria (i zogr	TH
•	Address	Po Os	B	X S	1,9,	Ho?
	Reason(s) for filing	(Check pr	oper	box)		
	New Well					Chang
	Recompletion					011
	Change in Ownershi If change of ownershi and address of pre-	ship give				Casino
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(Date)

W MEXICO OIL CONSERVATION COMMISSION

Form C-104
C----des Old C-104 and C-110

SANTA FE	REQUEST F	OR ALLOWABLE	Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TRAN	AND VSPORT OIL AND NATURAL	GAS			
LAND OFFICE	i AUTHORIZATION TO THE					
TRANSPORTER OIL						
OPERATOR GAS						
PRORATION OFFICE						
Gettly Old.	Ch 200 ration					
Addross	21.9, Hobbs, New Brillian &	bho				
		Other (Please explain)				
Reason(s) for filing (Check proper bo	Change in Transporter of:	Omer (1 tease explans)				
Recompletion	Oil Dry Gas					
Change in Ownership	Casinghead Gas Condens	sate				
f change of ownership give name nd address of previous owner	Cidenates Oli Company,	% 3. * · 249, Iodds, I	100 1852 d.co 882140			
DESCRIPTION OF WELL AND	TEASE	1				
Lease Name	United No. Poel Name, Including Fo	rmation Kind of Lea	į.			
East To	35 (1833)	State, rede	eral or Fee State B-2209			
Location K 198	South Line	and 1980 Feet From	The West			
Unit Letter;						
Line of Section 10 To	ownship 198 Range	37E , NMPM,	County			
DESCRIPTION OF TRANSPOL	RTER OF OIL AND NATURAL GA	S				
Name of Authorized Transporter of O	or Condensate	Address (Give address to which app	roved copy of this form is to be sent;			
	**		roved copy of this form is to be sent)			
Name of Authorized Transporter of C	Security Gas Control of Dry Gas Control of State Control		roved gent of this form is to be sent)			
If well produces oil or liquids,	Unit Sec. Twp. Rge. M 10 19 37	Is gas actually connected?	When			
give location of tanks.		<u> </u>				
f this production is commingled w	with that from any other lease or pool,		Plug Back - Came Resty, Liff, Fosty			
Designate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Came Resty, Lift, Footy			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
Date opacion						
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth			
Perforations			Depth Casing Shoe			
Periordizano						
		CEMENTING RECORD	SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
			A service of the serv			
TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a able for this de	pth or be for full 24 hours)	oil and must be equal to or exceed top allow			
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-Ebls.	Gas - MCF			
Actual Frod, During 1990	0	!				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
Actual Prog. 1851. MCF/D	Longin of 1001					
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (shut-in)	Choke Size			
CERTIFICATE OF COMPLIA	NCE	OIL CONSER	VATION COMMISSION			
			3 1987			
I hereby certify that the rules an	d regulations of the Oil Conservation with and that the information given	APPROVED				
above is true and complete to	the best of my knowledge and belief.	BY	A CAN			
		TITLE				
		This form is to be filed	in compliance with RULE 1104.			
C.R. ala	de	If this is a request for all	lowable for a newly drilled or deepend			
Area Super	- ,	well, this form must be accompanied by a tabulation of the deviation of th				
		All sections of this form able on new and recompleted	must be filled out completely for allow wells.			
September	5 0, 190{	military and many and the	tt til and VI for changes of owner			

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.