

NEW MEXICO OIL CONSERVATION COMMISSION

Form O-104
Supersedes OMC-101 and O-11
Effective 1-1-65

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
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FILE	
D.O.G.S.	
FIELD OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	
NUMBER	

5-NMOCD-Hobbs
1-Midland-Adm. Unit
1-File
1-PJB-Engr.
1-CM-Eunice
6-WIO's

GETTY OIL COMPANY

Address
P.O. Box 730, Hobbs, NM 88240

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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

Went on line 2:45 p.m.,
February 19, 1981

Change of ownership give name
and address of previous owner

4-1-81

DESCRIPTION OF WELL AND LEASE

Abstract Bilberry-morrow Gas R-6623

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Getty 32 State Com.	1	Undesignated Morrow	State, XXXXXXXX	LG-6640
Location				
Unit Letter		Feet From The	Line and	Feet From The
G	1980	North	1980	East
Line of Section	Township	Range	NMCM,	County
32	21-S	32-E	Lea	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Western Crude Oil, Inc. (trucks)	P.O. Box 1142, Midland, TX 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	P.O. Box 1384, Jal, NM 88252					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	32	21S	32E	Yes	2/19/81

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Test	Prod. Rec.
		XX	XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.O.T.D.					
9/13/80	12/20/80	15,000'	14,958'					
Elevations (DF, KKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3257' GR	Morrow	14,394'	13,901'					
Perforations	Depth Casing Shoe							
2/spf 14,567-14,563, 14,527-14,524; 14,477-14,473 1/spf 14,435-14,425; 14,415-14,394 = 60 (.29") holes	15,000'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2	13 3/8	1047	1200					
12 1/2	9 5/8	4700	1750					
8 1/2	7	12930	2220					
5	4 1/2" liner	12,644-15,000	410					

TEST DATA AND REQUEST FOR ALLOWABLE (Oil Well) (Test must be after recovery, 13,901' time of load oil and must be equal to or exceed top all able 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-Beis.	Water-Beis.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Lbs. Condensate/MCF	Gravity of Condensate
3703 AOF	24 hrs.	3	48.2
Testing Method (piston, back pr.)	Tubing Pressure (psia-in)	Casing Pressure (psia-in)	Choke Size
4 pt.	--	--	various

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.

Dale R. Crockett
Dale R. Crockett
Area Superintendent
February 26, 1981

OIL CONSERVATION COMMISSION

APPROVED
BY *Jerry S. ...*
TITLE SUPERVISOR

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 calculation of the allowable 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 wells.
Fill out only Sections I, II, III, and VI for changes of name, well name or number, or transporter or other such change of condition.