#### (Form C-104) Revised 7/1/57

### REQUEST FOR (OIL) - (SAS) ALLOWABLE

New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Please indicate location:  D C B A  PRODUCING INTERVAL  Top 011/Gas Pay 3474 Name of Prod. Form. Grayburg  PRODUCING INTERVAL  Perforations Off Well Test  Off Well Test  Natural Prod. Test: bbis.oil, bbis water in hrs, min. Size  Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used); 164 bbls.oil, 0 bbis water in 18 hrs, 0 nin. Size  1960 FML & 660 FSL  Natural Prod. Test:   MCF/Day; Hours flowed   Choke Size    Natural Prod. Testing (pitot, back pressure, etc.);  Test After Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil), and scaling results   McF/Day; Hours flowed    Test After Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil), and    Some Press.   Nethod of Testing    Test After Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil), and    Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil), and    Casing Stock   Nethod of Testing    Test After Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil), and    Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil), and    Casing Stock   Nethod of Testing    Test After Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil), and    Casing Stock   Nethod of Testing    Test After Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil), and    Casing Stock   Nethod of Testing    Company of Operator)  Stock   Oli Company    Company of Operator    Company of Operator    Stock   Oli Company    Company of Operator    Company of Ope					(Place)	Marcieo	Septembe	September 5, 1958	
Company or Operators  Sec. 22  T. 178 R. S. Sec. 23  T. 178 R. S. Sec. 24  T. 178 R. S. Sec. 25  T. 172 R. S. Sec. 25  T. 172 R. S.							. <b>32</b> //	<b>34</b> 14	
Please indicate location:    County   Date   Spudded   July 19, 1958   Date Detailing Completed August 23, 1958   Date   Detailing Completed August 23, 1958   Detail	((	Company or	Operator)	, T. 178 , R 31	se) , NMPM.,	Grayburg-J	acksen	Pool	
Please indicate location:  D C B A  PRODUCINE INTERNAL  Top 011/0ss Pay 3474 Name of Prod. Form. Grayburg  PRODUCINE INTERNAL  Perforations Open Hole 3523-3580 Depth Open Hole 3523 Depth Open Hole 3523-3580 Depth Open Hole 3523-3580 Depth Open Hole 3523 Depth Ope		ga.		County Date Spudded	July 19, 1958	Data Drilling	Completed Aug	rest 23, 195	
Top 011/Gas Pay 3474 Name of Prod. Form. Grayburg    PRODUCING INTERVAL -				Elevation 38351	D.F. Total	Depth 3560'	PBTD	•••••	
E F G H Open Hole 3523-3580' Depth Casing Snoe 3523' Depth Open Hole 3523-3580' Depth Casing Snoe 3523' Depth Tubing 3501'  Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 164 bbls.oil, Obbls water in hrs, min. Size Tubing Casing and Camenting Record Sirr Fet: Sax Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size Tubing Casing and Camenting Record Sirr Fet: Sax Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size  Method of Testing (pitot, back pressure, etc.):  Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size  Method of Testing:  Test After Acid or Fracture Treatment: MCF/Day; Hours flowed Choke Size  Method of Testing: MCF/Day; Hours flowed Choke Size  MCF/Day; Hours flowed Choke S				Top Oil/Gas Pay 3474	Name	of Prod. Form.	Grayburg	<del></del>	
Consequence of the community of the comm	"		B A						
Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size  Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 164 bbls.oil, 0 bbls water in 18 hrs, 0 min. Size    Choke Size	E	F (	G H	Perforations Open Hole 3523-358	O' Depth Casin	g Shoe 3523'	Depth Tubing	3501'	
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used):    M	L	K	T I		bbls.oil.	bbls water	in hrs.	Choke	
CAS WELL TEST - Natural Prod. Test: MCF/Day; Hours flowed Choke Size  Natural Prod. Test: MCF/Day; Hours flowed Choke Size  Nethod of Testing (pitot, back pressure, etc.):  Test After Acid or Fracture Treatment: MCF/Day; Hours flowed  Choke Size Method of Testing:  Choke Size Method of Testing:  Test After Acid or Fracture Treatment: MCF/Day; Hours flowed  Choke Size Method of Testing:  Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):  Prestured with 1230 barrels lease oil mixed with 69,000; sam  Casing 2005 Press. Oil run to tanks  Cil Transporter Texas-New Maxies Pipeline Company  Gas Transporter  Gas Transporter  Threed 164 barrels new oil, no water, in 18 hours.  I hereby certify that the information given above is true and complete to the best of my knowledge.  Skelly Oil Company of Operator)  OIL CONSERVATION COMMISSION  By: (Company of Operator)  Citle Superintendent  Title Send Communications regarding well to:  Skelly Oil Company	M	N (	) P	Test After Acid or Frac	ture Treatment (afte	r recovery of volu	ume of oil equal	to volume of	
Sire Feet Sax  Set At 729 150  Share Feet Sax  Test After Acid or Fracture Treatment: MCF/Day; Hours flowed  Choke Size Method of Testing:  Method of Testing (pitot, back pressure, etc.):  Test After Acid or Fracture Treatment: MCF/Day; Hours flowed  Choke Size Method of Testing:  Method of Testing:  Method of Testing:  McF/Day; Hours flowed  Choke Size Method of Testing:  McF/Day; Hours flowed  McF/Day; Hours flowed  Choke Size Method of Testing:  McF/Day; Hours flowed  McF/Day; Hours flowed  Choke Size Method of Testing:  McF/Day; Hours flowed  Choke Size Method of Testing:  McF/Day; Hours flowed  Choke Size McF/Day; Hours flowed  Choke Size McF/Day; Hours flowed  Acid or Fracture Treatment:  McF/Day; Hours flowed  Choke Size McF/Day; Hours flowed  Acid or Fracture Treatment:  McF/Day; Hours flowed  Choke Size McF/Day; Hours flowed  Acid or Fracture Treatment:  McF/Day; Hours flowed  Choke Size McF/Day; Hours flowed  Acid or Fracture Treatment:  McF/Day; Hours flowed  Choke Size McF/Day; Hours flowed  Acid or Fracture Treatment:  McF/Day; Hours flowed  Acid Or Fracture	1960		o' Pal	GAS WELL TEST -					
Test After Acid or Fracture Treatment: MCF/Day; Hours flowed  Choke Size Method of Testing:  Choke Size Method of Testing:  Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Practured with 1230 barrels lease oil sixed with 69,000 sand  Casing Press. Date first new September 2, 1958  Cil Transporter Texas-New Mexice Pipeline Company  Gas Transporter  Gas Transporter  I hereby certify that the information given above is true and complete to the best of my knowledge.  Skelly Oil Company of Operator)  OIL CONSERVATION COMMISSION  By: (Company of Operator)  District Superintendent  Title District Superintendent  Send Communications regarding well to:  Skelly Oil Company		-						.ze	
Choke Size Method of Testing:    Method of Testing:   Method of Testing:	- /			• •				.owed	
sand):    Casing   2006   Tubing   600   Date first new oil run to tanks   September 2, 1958	8-5/ <b>8"</b>		7 1						
Casing Press. 200# Press. 60# Date first new oil run to tanks  Cil Transporter  Gas Transporter  Cas Transporter  Gas Transporter  I hereby certify that the information given above is true and complete to the best of my knowledge.  Skelly 0il Company  OIL CONSERVATION COMMISSION  By:  Company of Operator)  Company of Operatory  Company of Operatory  Company of Operatory  Company of Operatory	7*	35231	475	Prestured wi	th 1230 barrel	a lease oil	mixed with	69,000# sam	
Theres 164 barrels new cil, no water, in 18 hours.  I hereby certify that the information given above is true and complete to the best of my knowledge.  Skelly Oil Company  OIL CONSERVATION COMMISSION  By:  (Signature)  District Superintendent  Title  Send Communications regarding well to:  Skelly Oil Company			ļ	Casing 2004 Tubing	60# Date first	new Septem	mber 2, 195	8	
Thereby certify that the information given above is true and complete to the best of my knowledge.  SEP 8 1956  OIL CONSERVATION COMMISSION  By:  (Company of Operator)  (Signature)  District Superintendent  Title  Send Communications regarding well to:  Skelly 011 Company		<u> </u>		Cil Transporter	s-New Mexico P	ipaline Comp	any		
Thereof 164 barrels new oil, no water, in 18 hours.  I hereby certify that the information given above is true and complete to the best of my knowledge.  Skelly Oil Company  (Company of Operator)  By:  (Signature)  District Superintendent  Title  Send Communications regarding well to:  Skelly Oil Company				1					
I hereby certify that the information given above is true and complete to the best of my knowledge.  Skelly Oil Company  (Company of Operator)  OIL CONSERVATION COMMISSION  By:  (Signature)  District Superintendent  Title  Send Communications regarding well to:  Skelly Oil Company	temarks:	••••••	••••			•••••	***************************************	******	
OIL CONSERVATION COMMISSION  By:  (Company of Operator)  (Signature)  District Superintendent  Title  Send Communications regarding well to:  Skelly 011 Company		Flowed	164 barre	ls new oil, no wate	r, in 18 hours	<b>4.</b>			
OIL CONSERVATION COMMISSION  By:  (Company of Operator)  (Signature)  District Superintendent  Title  Send Communications regarding well to:  Skelly 011 Company					•••••		•••••••	••••••	
OIL CONSERVATION COMMISSION  By:  (Company of Operator)  (Signature)  District Superintendent  Title  Send Communications regarding well to:  Skelly 011 Company	I her	eby certify	that the info			the best of my kr	nowledge. Company		
Sy: ML Crand Superintendent  Title Send Communications regarding well to:  Skelly 011 Company	ipproved.	••••••••••	SEF 8	, 19 19 <b>5</b> £			•••••••		
Send Communications regarding well to:  Skelly 011 Company		OIL CONS	ERVATION	COMMISSION	Ву:	(Signat	ure)	······································	
itle Skelly Oil Company	y: <i>[][]</i>	LU	rusts	ong					
Name Data Volume	itle	#1] 4#H G	IAN PERPERTO	n of	(			į w.	
Box 38 - Hobbs, New Mexico				ν	Name	••••••			

OIL CONSERVATION COMMISSION

#### N Form C-110 PRevised 7/1/55

## NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO

(File the original and 4 copies with the appropriate district office)

# CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company o	or Operator_	Skelly (	011 Compa	ı <b>y</b>	Lease_	Lynch "A"	) 
Well No.	<b>9</b> Uni	t Letter	_S <b>22</b> _	T 178 R 318 I	Pool <b>Gray</b> l	ourg-Jackso	<b>82</b>
_				e (State, Fed.			
				e (State, Fed. ation of tanks:			
-							
Authorized	1 Transporte	r of Oil or C	onaensat	e Texas-New M	WALUT FIDE.	THE CAMPON	<b>y</b>
Address				Bex 1510 -	Midland, To	CTAS	
	(Give addre	ess to which	approve	Bex 1510 -	form is to	be sent)	
				d copy of this			
If Gas is n	(Give addroot being sold	ess to which , give reaso	ons and a	d copy of this i	present di	sposition:	
		Gas be	ing vented	l.			
D. c C	r:1: D1	12 00 ch = 1	ronor La	v) Now Wal	11		( <b>x</b> )
				x) New Wel			
Cnange in	1 ransporter	oi (Oneck O	nej: Oil	( ) Dry Gas	, , C'nead	Conde	maate (
Change in	Ownership		í	) Other			( )
Remarks:			·	) Other	Give expla	nation belo	ow)
	Now Well.						
	signed certifi ave been com		Rules and	d Regulations o	of the Oil C	onservatio	on Com-
Executed t	this the 5th	day of Sept	ember	19 <u><b>58</b></u>	,	ý.	
Approved_	SE	/3 <b>5/</b>	19	By	District Su	parintende	
OIL	CONSERVAT	'ION COMM	ISSION	Company	Skelly 01	l Company	<del></del>
ву ///	I Chrus	Trong	<del> </del>	Address_	Box 38 - H	obbs, New 1	lection
Title	SIL ARE GAS IX						