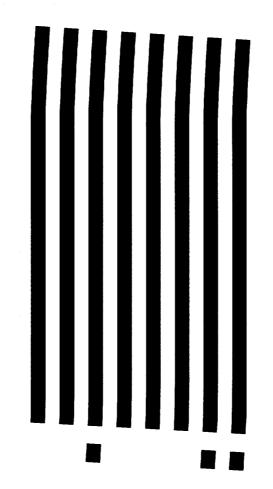
NO. OF COPIES REC	EIVED	16	
DISTRIBUTIO	BUTION		
SANTA FE		/	
FILE		/	-
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS		
OPERATOR		2	
PROBATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

	FILE /	_	AND		Ettective I-1	-65
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND	NATURAL	GAS	
	OIL /	~-				
	TRANSPORTER GAS /	-				
	OPERATOR 2	-				
	PRORATION OFFICE					
••	Operator		· · · · · · · · · · · · · · · · · · ·			
	Skelly Oil Company					
	Address					
	Box 730. Hobbs. New	Mexico				
	Reason(s) for filing (Check proper bo	•	Other (Pleas			_
	Recompletion	Change in Transporter of: Oil Dry G			d from T.B. #1)
	Change in Ownership	Casinghead Gas Conde		, #2 off.	10-1-66.	/
						
	If change of ownership give name					
	and address of previous owner		· · · · · · · · · · · · · · · · · · ·			
II.	DESCRIPTION OF WELL AND	LEASE				
	Lease Name	Well No. Pool Name, Including F	Formation	Kind of Leas		Lease No.
	Jicarilla "BY T.B.	22 20 Otero Gallup		State, Federa	or Fee Federal	Cont #68
	Location					
	Unit Letter;;;;	Feet From The Korth Lin	ne and <u>790</u>	Feet From	The The	 '
	I de et Control	Description of the second seco	MI (D)			0
	Line of Section 31 To	ownship 755 Range	, NMPN	, Rio A	rriba	County
m.	DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	AS			
	Name of Authorized Transporter of O			to which appro	oved copy of this form is	to be sent)
	Comertand Pinelines		1001 West Cent	tral Av.	- Denver. Colo	rado
	Name of Authorized Transporter of Co	dsinghead Gas or Dry Gas	Address (Give address	to which appro	wed copy of this form is	to be sent)
	El Pago Matural Gas	Company	Box 990, Farm	lugton, N	ew Maxico	
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connect	ed? Wh	en	
	give location of tanks.	28 SN	Yes			
		rith that from any other lease or pool,	give commingling orde	r number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen	Plug Back Same Re	es'v. Diff. Res'v.
	Designate Type of Complet	ion — (X)		† 	1 1	1
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	1
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
	Perforations				Depth Casing Shoe	
			DEPTH S		24042.05	
	HOLE SIZE	CASING & TUBING SIZE	DEPTHS	ET	SACKS CE	MENT
					<u> </u>	<u> </u>
į	A CONTRACT OF STREET, AND ADDRESS OF STREET, AND ADDRESS OF STREET, AND ADDRESS OF STREET, ADDRESS OF STREET,	A STATE OF THE PARTY OF THE PAR				
v.	TEST DATA AND REQUEST I	FOR ALLOWARLE (Test must be s	after recovery of total volu	me of load oil	and must be seld Roi	Incest top allow-
••	OIL WELL	able for this d	epth or be for full 24 hour.	P)	CFINI	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flot	e, pump, gas li		
			T BSATE / Bras 12 12	<u> </u>	Chara Sias	090
	Length of Test	Tubing Pressure	Casing Pressure		Charagine ()	CON
	Actual Prod. During Toot	Oil - Bhie.	Weter - Bbie.		Gen MOP	3 /
	Weiget blog Daving 1991	0.11-22.2.	""		OIL	51.3
	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMC	F	Gravity of Condensat	•
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in)	Choke Size	
					<u> </u>	
VI.	CERTIFICATE OF COMPLIAN	1CE	OIL		ATION COMMISSION	ON
			45556	NO	/ 1 4 196 6	. 19
	I hereby certify that the rules and	regulations of the Oil Conservation with and that the information given		1 0: 1		
	above is true and complete to the	ne best of my knowledge and belief.	BYOrigina	al Signed	by A. R. Kend	ric k
			DETRO	DIEUM EN	CINEER DIST. NO	D. 3
		(SIGNED) H. E. Aab			compliance with RUL	
	(Signature)		wall this form mus	t he accompa	wable for a newly dril mied by a tabulation	of the deviation
	, -	•	tests taken on the	well in acco	rdance with RULE 1	11.
	District Superinter	itle)	All sections of able on new and re	this form mu	et be filled out comp	letely for allow-
	November 10, 1966	•	Fill out only	Sections T T	I III and VI for chi	anges of owner,
		Pate)	well name or number	r, or transpor	ter, or other such char	ige of condition.
			Separate Form completed wells.	s C-104 mus	t be filed for each	pool in multiply
			ii completed wells.			

31.17







Job separation sheet

	NO. OF COPIES RECEIVED					
	DISTRIBUTION	NEW MEXICO O	L CONSERVATION COM	MISSION	Form C-104	
	SANTA FE /		ST FOR ALLOWABLE	MISSION	Supersedes Old	C-104 and
	FILE	WE GOL	AND		Effective 1-1-6	১
	U.S.G.S.	AUTHORIZATION TO	· ·· · · ·	NATURAL GAS		
	LAND OFFICE	AOTHORIZATION 19		TOTAL ON		
	0,1					
	TRANSPORTER GAS /			•		
	OPERATOR /					
	PRORATION OFFICE					
••	Operator		,			
	S	kelly Oil Company				
	Addroce	360 Lincoln Street, Denve	r, Colorado 8020	13		
	金	YXXXXBOHCHEROXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Taganaxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx			
	Reason(s) for filing (Check prope		Other (Pleas	se explain)		
	New Well	Change in Transporter of:	-			
	Recompletion	O:1 X DI	ry Gas			
	Change in Ownership	Casinghead Gas C	ondensate			
17	If change of ownership give na and address of previous owner DESCRIPTION OF WELL A					
14.	Lease Name	Well No. Pool Name, Includi	ng Formation	Kind of Lease		Lease
	Jicarilla B	20 Otero Gall	מוו	State, Federal or Fee	Federal	Cont.
	Location	The Ville of the Control of the Cont	<u> </u>			
	Unit Latter D	790 Feet From The North	Line and 790	Feet From The	West	
	Unit Letter;;	170 17000 1700				
	Line of Section 31	Township 25 N Range	5 W , NMF	M. Rio Arriba		Cot
		ACCOMPDIATE OF ALL AND MATERIAL	CAS			
11.	Name of Authorized Transporter	PORTER OF OIL AND NATURAL of Oil V or Condensate	Address (Give address	s to which approved copy	of this form is	o be sent)
) D O Pour	3120 Midland	Towas 70	701
	Western Ull Tran	sportation Co. (P/L Div. of Casinghead Gas X) of Dry Gas \Box	Address (Give address	3120 Midland, s to which approved copy	of this form is	o be sent)
	El Paso Natural G		P. O. Box 99			
	DE TODO NATURAL G	Unit Sec. Twp. Rge				·-

Sec.

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

IV. COMPLETION DATA

Date Compl. Ready to Prod.

Name of Producing Formation

Oil Well

If well produces oil or liquids, give location of tanks.

Elevations (DF, RKB, RT, GR, etc.)

Date Spudded

Perforations

Designate Type of Completion -(X)

25 N

5 W

Gas Well

New Well

TUBING, CASING, AND CEMENTING RECORD

Total Depth

Top Oll/Gas Pay

Yes

Workover

Deepen

-104 des Old C-104 and C-110 ve 1-1-65

Lease No

Cont. #68

County

Plug Back Same Res'v. Diff. Res'v.

ī	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	ACHE CEMENT			
Γ				0.			
		·					
				<u>i</u>			
	TEST DATA AND REQUEST F	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 allo			
	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 Proa. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF			
	GAS WELL			Carrylan of Condensate			
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
	CERTIFICATE OF COMPLIANCE		OIL CONSER	RVATION COMMISSION 2 1 197			
	I hereby certify that the rules and	regulations of the Oil Conservation with and that the information given	APPROVED				
	Commission have been complied above is true and complete to the	he best of my knowledge and belief.					
			TITLE	SUPERVISOR DIST, 48			
	///		mula form in to be filed	in compliance with RULE 1104.			
District Operations Superintendent (Title) 5-18-70 (Date)							
		well, this is a request for allowable to a tabulation of the deviate well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions.					
					Separate Forms C-104 must be filed for each pool in multi- completed wells.		

