

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	1
PRODUCTION OFFICE	4

Operator
Getty Oil Company

Address
P. O. Box 3360, Casper, WY 82602

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☒	Castinhead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner
Skelly Oil Company, Box 3360, Casper, WY 82602

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No. Pool Name, Including Formation	Kind of Lease	Lease No.
L. L. McConnell	6 So. Blanco-Pictured Cliffs	State, Federal or Fee	Fed SF 979602
Location	Unit Letter	1570 Feet From The	South Line and 1735 Feet From The East
Line of Section	30 Township	25N Range	3W, 104PM, Rio Arriba County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Oil or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	Box 990, Farmington, NM 87401
If well produces oil or condensate, give location of tanks	Is gas actually connected? When
	yes

If multiple formation is commingled with that from any other lease or pool, give commingling order numbers:

COMPLETION DATA

Designate Type of Completion - (X)	Test Well	Gas Well	New Well	Recompletion	Drill-in	Plug Back	Some Restr.	Full Restr.
First Spudded	Date Drilling Began	Total Depth	F.B.T.D.					
Drilling Method (P, L, E, R, G, etc.)	Name of Drilling Formation	Top Oil/Gas Pay	Testing Depth					
Remarks			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead oil and must be equal to or exceed 1% allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Drilling Method (P, L, E, R, G, etc.)	
Length of Test	Casing Pressure	Casing Pressure	Crate Size
Actual Fluid During Test	Oil Rate	Water Rate	CASE-MCF

GAS WELL

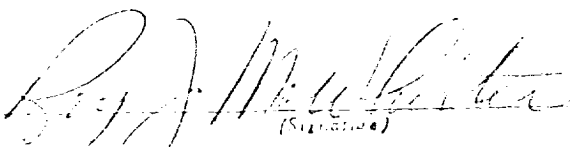
Actual First Gas Run To Tanks	Date of Test	Rate Condensate MCF	Gravity of Condensate
Drilling Method (P, L, E, R, G, etc.)	Casing Pressure (24-hr)	Crate Size	

CERTIFICATE OF COMPLIANCE

OIL CONSERVATION COMMISSION

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.

APPROVED _____, 19____
BY **ORIGINAL** SUPERINTENDENT
TITLE PETROLEUM ENGINEER DIST. NO. 3


(Signature)

Area Superintendent
(Title)

2/9/77
(Date)

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 tabulation of the pressure 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 owner, well name or number, or transporter or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple completed wells.

