

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-105
Effective 1-1-65

ILLEGIBLE

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROBATION OFFICE	

Getty Oil Company

Address

Box 3360, Casper, WY 82602

Person(s) for filing (Check proper box)

New Well ☐

Recompletion ☐

Change in Ownership ☒

Change in Transporter of:

Oil ☐

Condensate Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

Add b.g. trans. PLA

If change of ownership give name and address of previous owner

Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Jicarilla C	Well No.	9	Pool Name, Including Formation	South Blanco-Pictured Cl.	Kind of Lease	State, Federal or Free	Lease No.	Fed. Cont. #34
Location	Unit Letter	K	1450	Feet From The	South	Line and	1450	Feet From The	West
Line of Section	28	Township	25N	Range	5W	NMPM,	Rio Arriba	County	

III. 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)					
Plateau, Inc.	Box 108, Farmington, NM 87401					
Name of Authorized Transporter of Condensate Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	Box 990, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually commingled?	When
	J	28	25N	5W	Yes	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Resin	Full Resin
Time Spent	Time Spent Ready to Prod.	Total Depth	P.B.T.D.					
Formation (DF, ABE, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Testing Depth					
Test Results			Depth Coring Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable 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	Testing Pressure	Coring Pressure	Choke Size
Actual Production Test	Oil-BBL	Water-BBL	Gas-MCF
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Test Pressure (psia, psig, etc.)	Testing Pressure (psia-in)	Coring Pressure (psia-in)	Choke Size

VI. 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.

[Signature]
(Signature)

Area Superintendent
(Title)

2/9/77
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19__

BY ORIGINAL SIGNATURE OF J. HANWELL, JR.

TITLE PETROLEUM ENGINEER NO. 3

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 deviation 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 Form C-104 must be filed for each pool in multiply completed wells.

