

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. OPERATOR	
Operator Getty Oil Company	
Address P.O. Box 3360, Casper, WY 82602	
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"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lydia Rentz	Well No. 7	Pool Name, Including Formation Ojito Gallup-Dakota <i>Ext.</i>	Kind of Lease State, Federal or Fee Federal	Lease No. SF079601
Location				
Unit Letter <u>C</u> : <u>800</u> Feet From The <u>North</u> Line and <u>1820</u> Feet From The <u>West</u>				
Line of Section <u>20</u> Township <u>25N</u> Range <u>3W</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 26251, Albuquerque, NM 87125			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990, Farmington, NM 87401			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 20	Twp. 25N	Rge. 3W
				Is gas actually connected? No
				When --

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res. <input type="checkbox"/>
Date Spudded 8-11-81	Date Compl. Ready to Prod. 1-5-82		Total Depth 8220'		P.R.T.D. 8176'			
Elevations (DF, RKB, RT, GR, etc.) 7232' 5222' GL 5235' KB	Name of Producing Formation Gallup-Dakota		Top Oil/Gas Pay 7025'		Tubing Depth 7878'			
Perforations 7025'-8084' Gallup-Dakota (Downhole Comingled)					Depth Casing Shoe 8218'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9 5/8"	32.3#	293.5'		165SX			
8 3/4"	7"	23.0#	6218'		1035SX			
6 1/4"	4 1/2"	11.6# (Liner)	8218'		300SX			
-	2 3/8"	4.7#	7878'		-			

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 oil able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 12-23-81	Date of Test 1-18-82	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 3 Hours	Tubing Pressure 175#	Casing Pressure Pkr.	Choke Size 3/4"
Actual Prod. During Test	Oil - Bbls. 74 BO (592)	Water - Bbls. 24BW	Gas - MCF 221 MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division 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)

2-04-82
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 11 1982, 19
BY Original Signed by CHARLES GHOLSON
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #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 deviotic 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.

