

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

045-NMOCD-Hobbs  
1-File  
1-Engr. DW  
1-Foreman CRM  
1-JA 1-Laura Richardson  
1-BW  
1-CB 1-CP

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
MAIL	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATION	
REGISTRATION OFFICE	

1. Operator  
Getty Oil Company

Address  
P.O. Box 730, Hobbs, New Mexico 88240

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

Other (Please explain)  
Well reclassified from Gas well to Oil well effective January 1, 1983

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name State Q	Well No. 1	Pool Name, Including Formation Tubb Oil and Gas	Kind of Lease State, Federal or Fee State	Lease No.
-----------------------	---------------	--	--	-----------

Location  
Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West  
Line of Section 36 Township 21-S Range 37-E, NMPM, Lea 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"/> Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510, Midland, TX 79701
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Getty Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1137, Eunice, NM 88231

If well produces oil or liquids, give location of tanks.	Unit N	Sec. 36	Twp. 21-S	Rge. 37-E	Is gas actually connected? No	When
--	-----------	------------	--------------	--------------	----------------------------------	------

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing 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	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - 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.

D. R. Crockett  
(Signature)  
Area Superintendent  
(Title)  
January 7, 1983  
(Date)

OIL CONSERVATION DIVISION  
APPROVED JAN 10 1983, 19\_\_\_\_  
BY JERRY SEXTON  
ORIGINAL SIGNED BY  
TITLE DISTRICT 1 SUPR.

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 deviated 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 conditions.  
Separate Form C-104 must be filed for each pool in multiple completed wells.

RECEIVED  
JAN 7 1983  
O.C.D.  
MOBBS OFFICE

RECEIVED  
JAN 7 1983  
O.C.D.  
MOBBS OFFICE