

DISTRIBUTION	5	
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FILE		1
G.S.		1
D OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
PRORATION OFFICE		

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-110
Effective 1-1-65

RECEIVED

5-1974

I. OPERATOR
Skelly Oil Company
Address
P. O. Box 1351, Midland, Texas 79701
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)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Skelly Unit	Well No. 115	Pool Name, including Formation Grayburg-Jackson San Andres	Kind of Lease State, Federal or Fee Federal	Lease No. 029419(4)
Location Unit Letter F 2630 Feet From The North Line and 1330 Feet From The West Line of Section 22 Township 17S Range 31E, NMPM, Eddy 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, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2197, Houston, Texas 77001			
If well produces oil or condensate, give location of tanks. LACT	Unit A	Sec. 22	Twp. 17S	Rge. 31E
Is gas actually connected? Yes			When 3-12-74	

If this production is commingled with that from any other lease or pool, give commingling order number: PC-450

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-28-74	Date Compl. Ready to Prod. 3-12-74		Total Depth 4000' 3981'		P.B.T.D. --			
Elevations (DF, RKB, RT, GR, etc.) 3846' DF	Name of Producing Formation Grayburg-Jackson San Andres		Top Oil/Gas Pay 3344'		Tubing Depth 3198'			
Perforations 3350-3832'					Depth Casing Shoe 3981'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4" 7-7/8"	CASING & TUBING SIZE 8-5/8" OD Casing 5-1/2" OD Casing		DEPTH SET 666' 3981'		SACKS CEMENT 375 Class "C" 1500 Cement			
		2 3/8"		3198				

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 3-12-74	Date of Test 3-18-74	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hours	Tubing Pressure 60#	Casing Pressure --	Choke Size 12/64"
Actual Prod. During Test --	Oil-Bbls. 82	Water-Bbls. 0	Gas-MCF 65

GAS WELL

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

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.

(SIGNED) LELAND FRANZ

District Production Manager (Signature) Leland Franz

April 2, 1974 (Title)

(Date)

OIL CONSERVATION COMMISSION

APR 10 1974

APPROVED BY

BY W. A. Gussitt

TITLE OIL AND GAS INSPECTOR

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.