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# NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)

Santa Fe, New Mexico

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## REQUEST FOR (OIL) - (GAS) ALLOWABLE

NOV 1 1960

New Well

ARTESIA

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

October 31, 1960

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company

Lea "D"

Well No. 5, in NE 1/4 SE 1/4,

(Company or Operator)

(Lease)

I

Sec. 26

T. 17-S

R. 31-E

NMPM,

Grayburg Jackson

Pool

Unit Letter

Eddy

County. Date Spudded Sept. 17, 1960 Date Drilling Completed Oct. 22, 1960

Elevation 3844' DF Total Depth 3951' BPTD --

Top Oil/Gas Pay 3813' Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations None

Open Hole 3811-3951' Depth Casing Shoe 3811' Depth Tubing 3794'

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 423 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 40/64" Choke

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Fractured w/ 1500 bbls. 1st. oil & 60,000# 20/40 sand.

Casing Press. 400# Tubing Press. 100# Date first new oil run to tanks October 28, 1960

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter None

Remarks:

Well flowed 423 bbls. of oil in 24 hrs. through 40/64" choke, T.P. 100#, C.P. 400#.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved. OCT 31 1960, 19.

Skelly Oil Company

(Company or Operator)

By: [Signature]

(Signature)

Title Dist. Supt.

Send Communications regarding well to:

Name Skelly Oil Company

Address Box 38 - Hobbs, New Mexico

OIL CONSERVATION COMMISSION

By: [Signature]

Title OIL AND GAS INSPECTOR

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NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110  
(Rev. 7-60)

**RECEIVED**

**NOV 1 1960**

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Lea "D"</b>		ARTESIAN No. <b>5</b>	
Unit Letter <b>I</b>	Section <b>26</b>	Township <b>17-S</b>	Range <b>31-E</b>	County <b>Eddy</b>			
Pool <b>Grayburg Jackson</b>				Kind of Lease (State, Fed Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>G</b>	Section <b>26</b>	Township <b>17-S</b>	Range <b>31-E</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Texas-New Mexico Pipe Line Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1510 - Midland, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Waiting on connection - Gas being vented.**

**REASON(S) FOR FILING** (please check proper box)

New Well ☒ Change in Ownership ☐  
Change in Transporter (check one) Other (explain below)  
Oil ☐ Dry Gas ☐  
Casing head gas ☐ Condensate ☐

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **31st** day of **October**, 19 **60**.

OIL CONSERVATION COMMISSION

Approved by  
**M. L. Armstrong**  
OIL AND GAS INSPECTOR

Date  
**OCT 31 1960**

By  
**C. J. Acuña**  
Title  
**Dist. Supt.**  
Company  
**Skelly Oil Company**  
Address  
**Box 38 - Hobbs, New Mexico**