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| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

MAY 19 1975

I. Operator **O.C.C. ARTESIA, OFFICE**
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)
To establish transporter of dry gas

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|----------------------|
| Lease Name Forty-Niner Ridge Unit | Well No. 2 | Pool Name, Including Formation Forty-Niner Ridge - Morrow | Kind of Lease State, Federal or Fee Federal | Lease No. 0543827 |
| Location Unit Letter 'G'; 1980 Feet From The North Line and 1980 Feet From The East Line of Section 21 Township 23S Range 30E, NMPM, Eddy County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|---|-----------|-----------|-----------|-----------------------------------|-----------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> None | Address (Give address to which approved copy of this form is to be sent) --- | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Natural Gas Pipeline Company of America | Address (Give address to which approved copy of this form is to be sent) P. O. Box 236, Midland, Texas 79701 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit - | Sec. - | Twp. - | Pge. - | Is gas actually connected? Yes | When 5-13-75 |

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 | Same Res'v. | Diff. Res'v. |
| | | X | X | | | | | |
| Date Spudded 7-17-74 | Date Compl. Ready to Prod. 11-23-74 | | Total Depth 14,600' | | P.B.T.D. 14,549' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3213' DF | Name of Producing Formation Morrow | | Top Oil/Gas Pay 13,805' | | Tubing Depth 12,500' | | | |
| Perforations Morrow perms. 13,805-14,156' | | | | | Depth Casing Shoe | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| See Attached Sheet | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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 2195-1920 | Length of Test 8-1/2 Hrs. | Bbls. Condensate/MMCF 0 | Gravity of Condensate -- |
| Testing Method (pitot, back pr.) Back Pressure | Tubing Pressure (Shut-in) 4389# | Casing Pressure (Shut-in) | Choke Size 12/64" |

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

Leland Franz

(Signature)

District Production Manager

(Title)

May 15, 1975

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 23 1975, 19

BY W. A. Gressett

TITLE SUPERVISOR, DISTRICT II

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

Skelly Oil Company
Forty Niner Ridge Unit Well No. 2
1980' FNL and 1980' FEL, Sec. 21-23S-30E
Eddy County, New Mexico
Form C-104 Section V (Continued)

TUBING, CASING AND CEMENTING RECORD

| Hole Size | Casing & Tubing Size | Depth Set | Sacks Cement |
|-----------|---------------------------|-----------|------------------|
| 36" | 30" OD | 30' | 6 Yds. Ready-Mix |
| 26" | 20" OD | 723' | 1850 Sacks |
| 17-1/2" | 13-3/8" OD | 3579' | 2900 Sacks |
| 8-1/2" | 7-5/8" & 7-3/4" OD | 11314' | 2650 Sacks |
| - | 2-7/8" & 2-3/8" OD Tubing | 12500' | - |

OIL CONSERVATION COMMISSION

P. O. DRAWER DD

ARTESIA, NEW MEXICO 88210

RECEIVED

MAY 23 1975

O. C. C.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

Date May 22, 1975

This is to notify the Oil Conservation Commission that connection
for the purchase of gas from the Skelly Oil Company
Operator

Forty Niner Ridge # 2 Sec. 21, T23S, R30E
Lease Well & Unit S.T.R.

Sand Dunes West Natural Gas Pipeline Company of America
Pool Name of Purchaser

was made on May 13, 1975.

Natural Gas Pipeline Company of America
Purchaser

M. James McFarland
Representative

Measurement Engineer
Title

cc: To operator
Oil Conservation Commission - Santa Fe