

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

II. DESCRIPTION OF WELL AND LEASE				
Lease Name Getty Federal 24	Well No. 1	Pool Name, including Formation Livingston Ridge Delaware	Kind of Lease State, Federal or <u>Lease</u>	Lease No. NM-29233
Location Unit: Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>24</u> Township <u>22-S</u> Range <u>31-E</u> , NMPM, Eddy County				

III. RESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
Enron Trading and Transportation Enron Energy Corp					P.O. Box 1188 Houston, Texas 77251-1188	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> Effective date 93					Address (Give address to which approved copy of this form is to be sent)	
Texaco Exploration and Production Inc.					P.O. Box 730 Hobbs, New Mexico 88240	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rgn.	Is gas actually connected?	When?
	G	24	22S	31E	Yes	6-25-90
If this production is commingled with that from any other lease, connect...						

IV. 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																							
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <p>gc</p> <p>11-1</p> <p>11-1</p> <p>11-1</p> </div> <div style="width: 60%; text-align: center;"> <p>TUBING, CASING AND CEMENTING RECORD</p> <table border="1" style="width: 100%;"> <thead> <tr> <th>HOLE SIZE</th> <th>CASING & TUBING SIZE</th> <th>DEPTH SET</th> <th>SACKS CEMENT</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> </div> <div style="width: 20%; text-align: right;"> <p>11-1</p> <p>11-1</p> <p>11-1</p> </div> </div>										HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT																
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V. TEST DATA AND REQUEST FOR ALLOWABLE																													

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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 Tank	Date of Test	

Date First New Oil Run To Tank	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

GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

VI. OPERATOR 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.

771 C. Duncan
Signature
M.C. Duncan
Printed Name
7-27-92
Date
Engineer's Assistant
Title
393-7191
Telephone No.

OIL CONSERVATION DIVISION

Date Approved 11/01/1992

By _____ ORIGINAL SIGNED BY

Title _____ SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filled out for allowable on new and reconstructed walls.