

OIL CONSERVATION DIVISION

P. O. BOX 7088  
SANTA FE, NEW MEXICO 87501

5-NMOCB-Artesia 1-JA  
1-File 1-BW  
1-Engr. PWS 1-BB  
1-Foreman EF 1-CB  
1- Laura Richardson 1-CP

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED WIO's

DEC 1 1982

Getty Oil Company

O. C. D.

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 ☐

ARTESIA OFFICE  
Other (Please explain)

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Salt Draw 11 Fed. Com.	1	Undesignated Morrow	State, Federal or Fee Federal	NM-1341

Location

Unit Letter G : 1880 Feet From The North Line and 1980 Feet From The East

Line of Section 11 Township 25-S Range 28E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
The Permian Corporation	P.O. Box 3119, Midland, TX 70702			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Llano, Inc. Transporter	P.O. Box 1320, Hobbs, NM 88240			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	G	11	25S	28E
Is gas actually connected?		When		
Yes		11-10-82		

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

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
3-30-81	5-28-82		13,550'		13,506'				
Elevations (DF, RAB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
2425.4 GL	Morrow		12,701		12,420'				
Perforations						Depth Casing Shoe			
12,701 - 12,743		Morrow				13,550'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	437'	1500 SXS
17 1/2"	13 3/8"	2604'	3500 SXS
12 1/4"	9 5/8"	9830'	3360 SXS
8 1/2"	7"	liner 12,726 - 9548'	500 SXS
6 1/8"	4 1/2"	liner 13,550 - 12,448'	145 SXS

TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

(Test must be after recovery of total volume of test oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) 238 12362

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 Will 4-point down sales line.

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
650	4 hours	.183	-
Testing Method (prior, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back press.	4362# PSIG	-	5/64"

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)

November 10, 1982  
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 0 3 1982, 19

Original Signed By  
Leslie A. Clements

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 Form C-104 must be filed for each pool in multipl completed wells.