

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-1
Effective 1-1-65

DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 1
OPERATOR	3
OPERATION OFFICE	

Getty Oil Company

Address

Box 3360, Casper, WY 82602

Producer(s) for filing (Check proper box)

New Well ☐

Permitting Action ☐

Change in Ownership ☒

Change in Transporter of:

Oil ☐

Condensate Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

If change of ownership give name and address of previous owner

Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Jicarilla "B"	6	Otero Gallup	State, Federal or Free Fed. Cont.	#68
Location	Unit Letter	Feet From The	Line and	Feet From The
	F	1980	North	1980
			Line and	West
Line of Section	Township	Range	Section	County
32	25N	5W		Rio Arriba

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)		
Plateau, Inc.	Box 108, Farmington, NM 87401		
Name of Authorized Transporter of Condensate Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Co.	Box 990, Farmington, NM 87401		
If well produces oil or liquids, give formation of tanks.	Is gas actually condensed? When		
Unit	Sec.	Twp.	Range
B	28	25N	5W

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	Some Restr. Flow Restr.
Designated							
Date Drilled	Date Casing Ready to Prod.	Total Depth	F.B.T.D.				
Formation (AP, NBP, AT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
Depth (feet)			Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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)

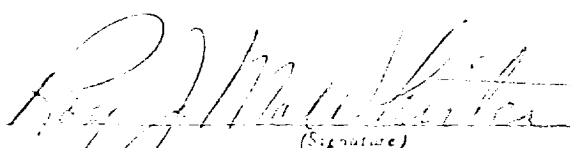
Date First New Oil Run To Tanks	Date of Test	Producing Method (Pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Oil/Gas Ratio
Actual Flow During Test	Oil Rate	Water Rate	Oil/Gas Ratio

GAS WELL

Actual Flow Test (MCF/D)	Length of Test	Rate Condensate (MCF/D)	Gravity of Condensate
Test Pressure (psia, Back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size

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.

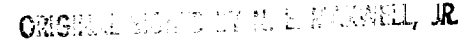


Area Superintendent

2/9/77
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19

BY 
PETROLEUM ENGINEER DIST. NO. 3

TITLE _____

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.

