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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	4
REGISTRATION OFFICE	

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-110
Effective 1-1-65

Operator Getty Oil Company	
Address Box 3360, Casper, WY 82602	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of:
Production ☐	Oil ☐ Dry Gas ☐
Change in Ownership ☒	Casinghead Gas ☐ Condensate ☐
If change of ownership give name and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602	

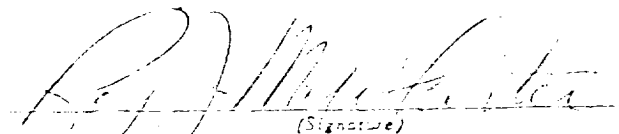
DESCRIPTION OF WELL AND LEASE			
Lease Name L. L. McConnell	Well No. 1	Pool Name, Including Formation S. Planco-Pictured Cliffs	Kind of Lease State, Federal or Fee Fed SF 979602
Location Unit Letter N 1190 Feet From The South Line and 1450 Feet From The West			
Line of Section 30 Township 25N Range 3W N.M.P.M. Rio Arriba County			

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)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	Box 990, Farmington, NM 87401
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	Yes

COMPLETION DATA			
Designate Type of Completion - (X)			
Old Well	Old Well	New Well	Workover
Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded	Date Comp. Ready to Prod.	Total Depth	P.B.T.D.
Drivings (D.F., R.A.B., R.T., G.R., etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations		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 (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Bbls.

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Pbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Testing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION
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.	APPROVED _____, 19____
 (Signature) Area Superintendent (Title) 2/7/77 (Date)	BY ORIGINAL SIGNED BY N. E. MAXWELL, JR. 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. Form C-104 is to be filed for each pool in multiply

