

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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ILLEGIBLE

Getty Oil Company

Address

Box 3360, Casper, WY 82602

Present(s) for filing (Check proper box)

New Well

Percy's Station

Change in Ownership (X)

Change in Transporter of:

Oil

Dry Gas

Condensate Gas

Condensate

Other (Please explain)

Add big trans.

If change of ownership give name and address of previous owner

Skelly Oil Company, Box 3360, Casper, WY 82602

DESCRIPTION OF WELL AND LEASE

Well Name	Well Number, Production	Kind of Lease	Lease No.
Jicarilla C	17	South Blanco-Pictured Cl.	State, Federal or Fee Fed. Cont. #34

Location

Unit Letter D : 1190 Feet From The North Line and 1190 Feet From The West

Line of Section 28	Township 25N	Ranger 5W	County Rio Arriba
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DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorizing Transporter of Oil () or Condensate (X)

Address (Give address to which approved copy of this form is to be sent)

Plateau, Inc.

Box 108, Farmington, NM 87401

Name of Authorizing Transporter of Condensate () or Dry Gas (X)

Address (Give address to which approved copy of this form is to be sent)

El Paso Natural Gas Co.

Box 990, Farmington, NM 87401

Well number & Unit Number,

Unit, Sec., Twp., Range

Is gas actually connected? When

or location of lease.

J 28 25N 5W

Yes

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

COMPLETION DATA

Proximate Type of Completion - (X)	CH Well	Gas Well	New Well	Water Well	Deepen	Plug Back	Some Rest. Drift, Pools
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Date First Paid	Date of Last Paid	Total Depth	P.B.T.D.
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Bottom Hole (B.H.E.), E.E., R.T., GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
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Completion	Casing Type	Depth Casing Set
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TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
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TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of free oil and must be equal to or exceed 10% allowable for this depth or be for full 24 hours)	Producing Method (Flow, pump, gas lift, etc.)	Completion Date	Bottom Hole (B.H.E.)
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Date First New Oil Run Test	Date of Test	Casing Pressure	Choke Size
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Completion Date	Tubing Pressure	Bottom Hole (B.H.E.)	Choke Size
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Initial Field Testing Date	CH-BHA	CH-CHG	CH-CHG
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WELL	BLDG Confid. / NWOF	Gravity of Crude
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Initial Field Test - NWOF	Length of Test	BLDG Confid. / NWOF	Gravity of Crude
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Initial Field Test - NWOF	Tubing Pressure (psi)	BLDG Confid. / NWOF	Gravity of Crude
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Initial Field Test - NWOF	Completion Date	CH-CHG	Choke Size
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