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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	1
OPERATOR		
PRORATION 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

I. Operator
Getty Oil Company
Address
Box 3360, Casper WY 82602
Reason(s) for filing (Check proper box)
New Well ☒ Change In Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change In Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name John Charles	Well No. 6A	Pool Name, including Formation Blanco Mesaverde	Kind of Lease Fed. 1-149 State, Federal or Fee	Lease No. ND. 8466
Location Unit Letter I 840 Feet From The East Line and 1850 Feet From The South Line of Section 13 Township 27N Range 9W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
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)					
El Paso Natural Gas Co.	Box 990, Farmington NM 87401					
If well produces oil or liquids, give location of tanks.	Unit 1	Sec. 13	Twp. 27N	Rge. 9W	Is gas actually connected? No	When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX	XX					
Date Spudded 9/2/77	Date Compl. Ready to Prod. 11/18/77		Total Depth 4470		P.B.T.D. 4452			
Elevations (DF, RAB, RT, GR, etc.) 5796' GR 5988' KB	Name of Producing Formation Pt. Lookout		Top Oil/Gas Pay 3700		Tubing Depth 4342			
Perforations 3700-4426'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	9-5/8" OD		302' KB		275			
8-3/4"	7" OD		2353' KB		325			
6 1/2"	4 1/2" OD Liner		Top 2241' Bottom 4469'		225			
	2-3/8" OD		4342'					

V. 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 - MCF

GAS WELL

Actual Prod. Test - MCF/D AOF 5287	Length of Test 3 hours	Bbls Condensate/MMCF 8 bbls	Gravity of Condensate 61°
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 560 psig	Casing Pressure (shut-in) 680 psig	Choke Size 3/4"

VI. 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.


(Signature)

Area Superintendent

(Title)

December 7, 1977

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____
BY _____
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.