

OIL CONSERVATION DIVISION

P O BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Administrative routing table with columns for DISTRIBUTION, SANTA FE, FILE, U.S.G.L., LAND OFFICE, TRANSPORTER, OIL GAS, OPERATOR, PROMOTION OFFICE, and Operator.

Getty Oil Company

Address: P.O. Box 3360, Casper, WY 82602-3360

Reason(s) for filing (Check proper box)

Checkboxes for New Well, Recompletion, Change in Ownership, Change in Transporter of Oil, Casinghead Gas, Dry Gas, and Condensate.

Other (Please explain): Previous condensate transporter was Giant Refining Co., now it is Permian Corp.

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name: Garrett Fed. Com. 2; Well No.: 1E; Pool Name: Basin Dakota; Kind of Lease: Fee; Location: Unit M, 1040 Feet From The South, Line and 1000 Feet From The West; Line of Section 13, Township 29N, Range 11W, NMPM, San Juan, County.

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil: Permian Corporation; Address: P.O. Box 1528, Denver, CO 80201; Name of Authorized Transporter of Casinghead Gas: El Paso Natural Gas Co.; Address: P.O. Box 990, Farmington, NM 87499.

If well produces oil or liquids, give location of tanks: Unit M, Sec. 13, Twp. 29N, Rge. 11W; Is gas actually connected? Yes.

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; Date Spudded; Date Compl. Ready to Prod.; Total Depth; P.B.T.D.; Elevations; Name of Producing Formation; Top Oil/Gas Pay; Tubing Depth; Perforations; Depth Casing Shoe.

TUBING, CASING, AND CEMENTING RECORD table with columns: 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 ullage for this depth or be for full 24 hours)

Test data fields: Date First New Oil Run To Tanks, Date of Test, Producing Method, Length of Test, Tubing Pressure, Casing Pressure, Choke Size, Actual Prod. During Test, Oil-Bbls., Water-Bbls., Gas-MCF.

AS WELL fields: Actual Prod. Test-MCF/D, Length of Test, Bbls. Condensate/MMCF, Gravity of Condensate, Testing Method, 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 Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: [Signature], Area Superintendent, 10-18-84.

OIL CONSERVATION DIVISION APPROVED: OCT 26 1984, BY: [Signature], SUPERVISOR DISTRICT # 3. 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 deviated 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 multiple completed wells.