

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF APPLICANTS	
DISTRIBUTION	
DATE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATION	
REGISTRATION OFFICE	

Operator: ARCO Oil and Gas Company  
Division of Atlantic Richfield Co.

Address: P.O. Box 1710, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box):  
 New Well  Change in Transporter of Oil  Dry Gas   
 Recompletion  Oil  Condensate   
 Change in Ownership  Casinghead Gas    
 Other (Please explain): effective 1-1-83 Western Crude Oil, Inc. name changed to Getty Trading and Transportation Co.

If change of ownership give name and address of previous owner: \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name State L Btty 5	Well No. 7	Pool Name, Including Formation Oil Center Bly	Kind of Lease State, Federal or Fee State	Lease No. A-1375
Location Unit Letter <u>C</u> : <u>910</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u>				
Line of Section <u>3</u> Township <u>21S</u> Range <u>36E</u> , NMPM, Lea? _____ County _____				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Getty Trading and Transportation Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1142, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. is gas actually connected? 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 Resrv.	Diff. Resrv.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.			
Elevations (DF, H&B, RT, CR, 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			

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	Chore Size
Actual Prod. During Test	Oil-Bbls.	water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pt.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Chore Size

VI. 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.

*R. J. Schellfeld*  
(Signature)

Engrg. Tech. Spec.

1-20-83

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED **JAN 25 1983**, 19\_\_

BY **EDDIE W. SEAY**

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 deviate 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 transporter, or other such change of ownership. This form is to be filed for each pool in a well.