

SKELLY OIL COMPANY

February 1, 1971

11 FEB 4 10 22

EXPLORATION & PRODUCTION DEPARTMENT
WEST CENTRAL DISTRICT

ADDRESS REPLY TO:
P. O. BOX 1351
MIDLAND, TEXAS 79701

A. B. CARY, EXPLORATION & PRODUCTION MANAGER
V. E. BARTLETT, EXPLORATION MANAGER
P. L. NUNLEY, PRODUCTION MANAGER
J. R. AVENT, ADMINISTRATIVE COORDINATOR

Re: Application for Non-Standard Location
Mexico "G" Well No. 2
S/2 of NW/4, Section 16, T24S, R37E,
Lea County, New Mexico

*NSV
issue 2-24-71
Fowler - upper yeso Pool
Rule 5
state of New Mexico
Oil Conservation Commission
P. O. Box 2088
Santa Fe, New Mexico 87501*

Attention: A. L. Porter, Jr.
Secretary-Director

Dear Sir:

Skelly Oil Company, operator of the Mexico "G" Well No. 2, Fowler Upper Yeso Pool, located 1980' FNL and 2308' FWL of Section 16, T24S, R37E, Lea County, New Mexico, respectfully requests administrative approval of a non-standard location for the subject well. This well was drilled as a Devonian test to 7993' in October 1958, and plugged back to 3500' and completed in the Langlie Mattix Zone as a gas producer on October 11, 1958, and subsequently depleted. In January 1971, well was cleaned out to 5703'; 5-1/2" casing set from surface to 5703'; interval from 5483' - 5569' (Fowler Upper Yeso) was perforated and fraced with 50,000 gallons gelled brine and 75,000# sand; and tested 78 BOPD and 95 BWPD on January 20, 1971. The Mexico "G" lease, comprising the NW/4 of Section 16, T24S, R37E, contains 160 acres and the Mexico "G" Well No. 2 is the only well on the lease producing from the Fowler Upper Yeso Pool.

All offset Fowler Upper Yeso Pool operators to the proposed non-standard oil proration unit are being advised, by registered mail, by copy of this application of this proposal. *Location*

If any further information is desired, please advise.

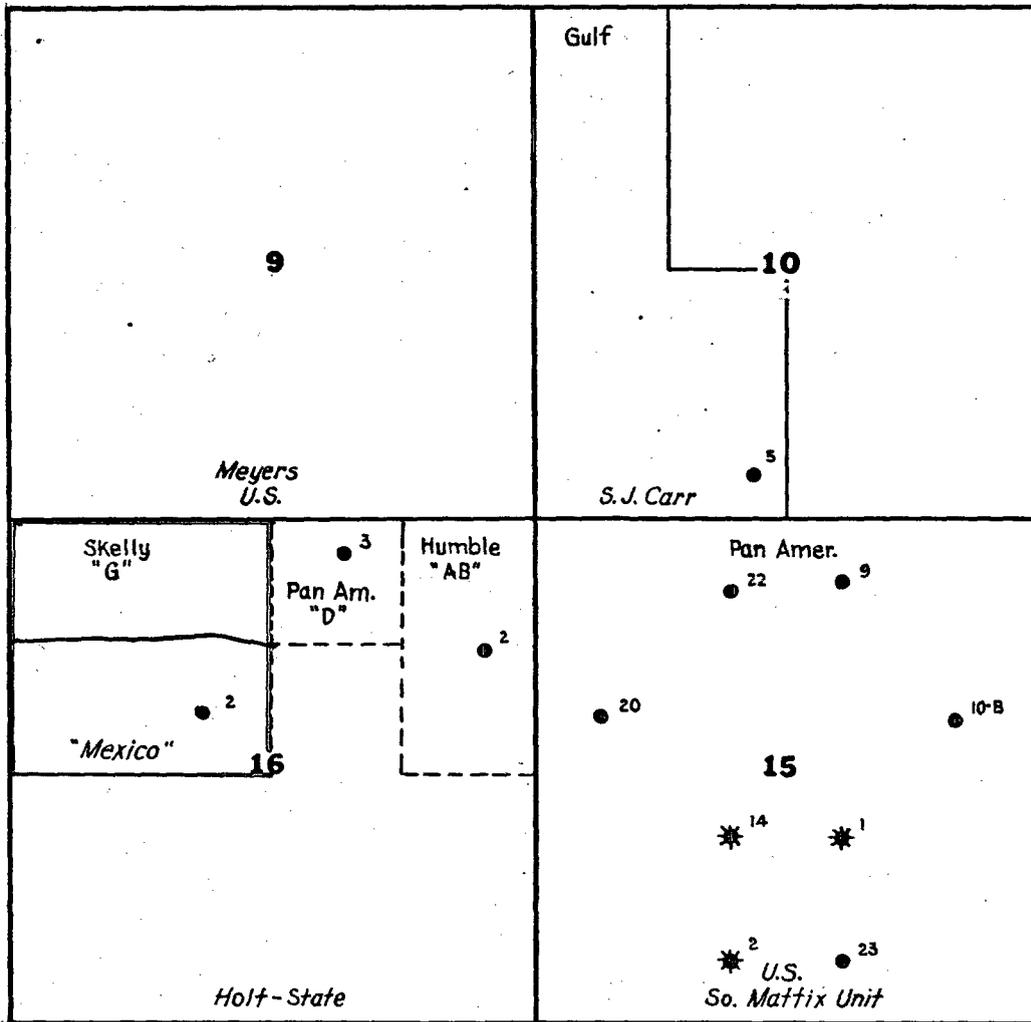
Yours very truly,

P. L. Nunley
P. L. Nunley

OVS/la

cc: Pan American Petroleum Corp., Box 68, Hobbs, New Mexico 88240 (Plat)

T
24
S



R 37 E

Skelly Oil Company
Mexico "G" Lease
Well No. 2
Section 16-T24S-R37E
Fowler Upper Yeso Pool
Lea County, New Mexico

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

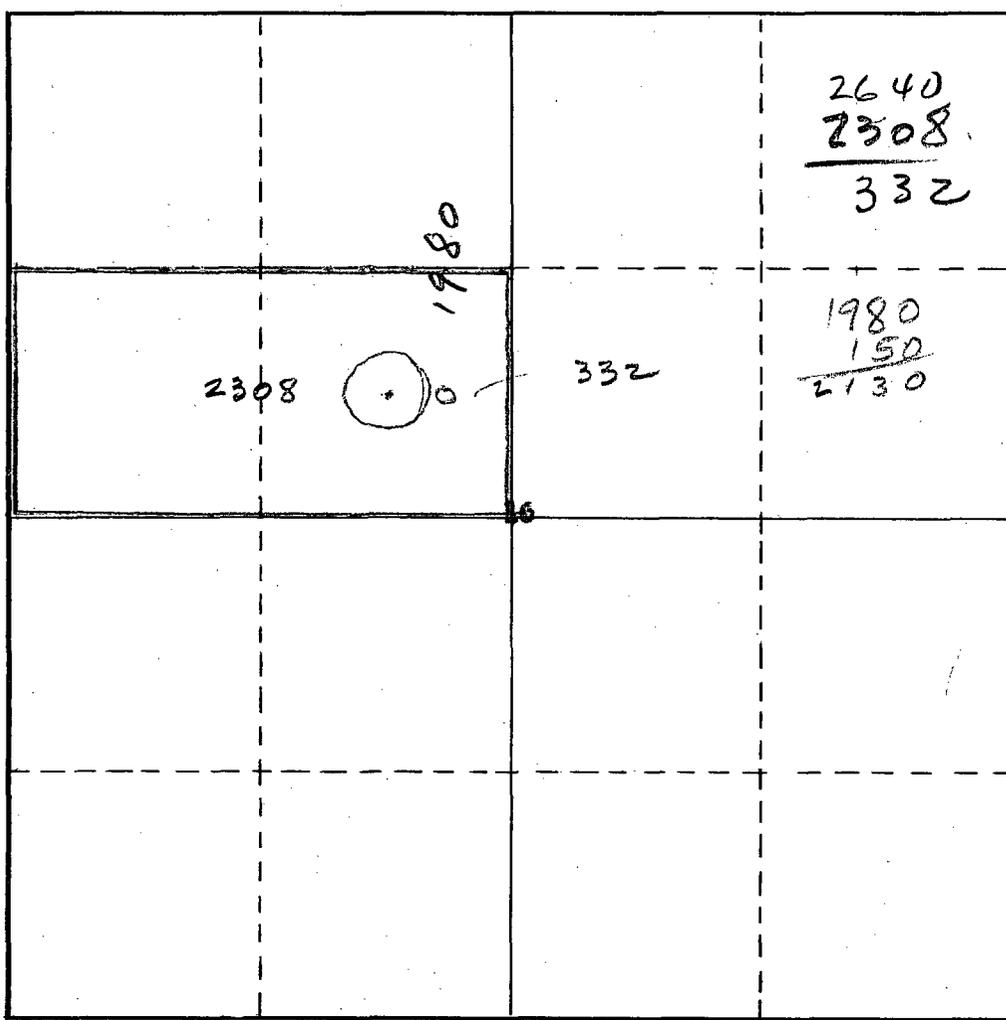
Operator Skelly Oil Company		Lease Mexico "G"			Well No. 2
Unit Letter F	Section 16	Township 248	Range 37E	County Lee	
Actual Footage Location of Well: 1980 feet from the North line and 2308 feet from the West line					
Ground Level Elev. 3248'	Producing Formation Upper Yesso		Pool Fowler Upper Yesso	Dedicated Acreage: 80 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

Yes No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name: P. L. Nunley
Position: District Production Manager

Company: Skelly Oil Company

Date: February 1, 1971

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed _____

Registered Professional Engineer and/or Land Surveyor

Certificate No. _____



NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
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-11
Effective 1-1-65

I. OPERATOR

Operator: Skelly Oil Company

Address: P. O. Box 1351, Midland, Texas 79701

Reason(s) for filing (Check proper box):

New Well <input type="checkbox"/>	Change in Transporter of:	Other (Please explain)
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Change of Pool designation on recom- pletion.
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	
	Dry Gas <input type="checkbox"/>	
	Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Mexico "G"</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Fowler Upper Yeso</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>B-1327</u>
Location				
Unit Letter <u>F</u>	<u>1980</u> Feet From The <u>North</u> Line and <u>2308</u> Feet From The <u>West</u>			
Line of Section <u>16</u>	Township <u>24S</u>	Range <u>37E</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"/>	Address (Give address to which approved copy of this form is to be sent)			
<u>The Permian Corporation</u>	<u>P. O. Box 3119, Midland, Texas 79701</u>			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
<u>El Paso Natural Gas Company</u>	<u>El Paso, Texas</u>			
If well produces oil or liquids, give location of tanks.	Unit <u>F</u>	Sec. <u>16</u>	Twp. <u>24S</u>	Rge. <u>37E</u>
	Is gas actually connected?		When	
	<u>Yes</u>			

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen <input checked="" type="checkbox"/>	Plug Back	Same Res'v.	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded <u>--</u>	Date Compl. Ready to Prod. <u>1-14-71</u>	Total Depth <u>7993'</u>	P.B.T.D. <u>5720'</u>					
Elevations (DF, RKB, RT, GR, etc.) <u>3257' DF</u>	Name of Producing Formation <u>Upper Yeso</u>	Top Oil/Gas Pay <u>5483'</u>	Tubing Depth <u>5577'</u>					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE <u>--</u>	CASING & TUBING SIZE <u>5-1/2"</u>	DEPTH SET <u>5703'</u>	SACKS CEMENT <u>350 sacks</u>					

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)

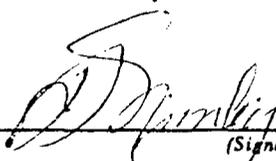
Date First New Oil Run To Tanks <u>1-14-71</u>	Date of Test <u>1-20-71</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pumping</u>	
Length of Test <u>24 hours</u>	Tubing Pressure <u>--</u>	Casing Pressure <u>--</u>	Choke Size <u>--</u>
Actual Prod. During Test	Oil - Bbls. <u>78</u>	Water - Bbls. <u>95</u>	Gas - MCF <u>--</u>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.


P. L. Nunley
(Signature)

District Production Manager
(Title)

February 1, 1971
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

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