

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

FEB 2 1977

O. C. C. AREA OFFICE

WELL	1	✓
FILE	1	✓
C.S.		
TO OFFICE		
TRANSPORTER	OIL	1
	GAS	1
OPERATOR		1
PRODUCTION OFFICE		

Operator
 Getty Oil Company
 Address
 P. O. Box 1351, Midland, Texas 79702
 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)
 Skelly Oil Company merged with Getty Oil Company effective 1-31-77

If change of ownership give name and address of previous owner
 Skelly Oil Company, P. O. Box 1351, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name Skelly Unit	Well No. 59	Pool Name, Including Formation Grayburg Jackson (Q.G.SA)	Kind of Lease State, Federal or Free	Lease No. LC-029426
Location Unit Letter A	Feet From The 660	Line and North	Feet From The 660	East
Line of Section 21	Township 17S	Range 31E	N.M.P.M. Eddy	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas-New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Continental Oil Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2197, Houston, Texas 77001
If well produces oil or liquids, give location of tanks. Unit H	Sec. 28
Twp. 17S	Rge. 31E
Is gas actually connected? Yes	When June 1, 1960

If this production is commingling with that from any other lease or pool, give commingling order number:
 PC-450

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Scale Remov.	Drill Risk
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Testing Depth					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

VI. 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-Ebbls.	Water-Ebbls.	Gas-MCF

GAS WELL

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

E. 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.

District Production Manager
 (Signature) Roland Franz
 February 1, 1977
 (Date)

OIL CONSERVATION COMMISSION
 FEB 9 1977
 APPROVED
 BY W.A. Gussert
 TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 100.
 If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of 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 re-completed wells.
 Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of condition.