

AUTHORIZATION TO PRODUCE OIL AND NATURAL GAS

Form O-104
Supplies Oil & Gas
1-10-67 1-1-65

RECEIVED

FEB 2 1977

I. OPERATOR
 OIL GAS
 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 Casthead Gas Condensate
 Other (Please explain)
 C. C. C.
 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
 Location
 Well No., Pool Name, Boundary Definition
 90 Grayburg Jackson (SR. O. G. SA)
 Kind of Lease
 State (Tex) or Pool
 LC-0294200
 Unit Letter
 C : 660 Feet From The North Line and 1980 Feet From The West
 Line of Section
 28 Township 17S Range 31E, NMPM, 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 Casthead 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 Sec. Twp. Rgn.
 H 28 17S 31E
 Is gas actually condensed? Yes
 Date
 June 1, 1960

IV. COMPLETION DATA
 Designate Type of Completion - (X)
 Oil Well Gas Well New Well Makeover Deepen Plug Back Same Rest. Unit. Inv.
 Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.
 Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth
 Perforations Depth Casing Shoe
 TUBING, CASING, AND CEMENT 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 held 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 Length of Test Bbls. Condensate/MACF Gravity of Condensate
 Testing Method (pitot, back pr.) Tubing Pressure (Shot-in) Casing Pressure (Shot-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.
 (Signed) LELAND FRANZ
 District Production Manager
 February 1, 1977
 (Date)

OIL CONSERVATION COMMISSION
 APPROVED FEB 8 1977, 19
 BY W. A. Grissett
 TITLE SUPERVISOR, DISTRICT II
 This form is to be filed in compliance with RULE 110a.
 If this is a request for allowables 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 true portion or other such changes of condition.