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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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-110  
Effective 1-1-65

I. TRANSPORTER			
Skelly Oil Company			
Address: Box 730 - Hobbs, New Mexico			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New well	<input checked="" type="checkbox"/>	Name in Transporter oil	
Deepening	<input type="checkbox"/>	II	<input type="checkbox"/>
Transporter change	<input type="checkbox"/>	Transporter gas	<input type="checkbox"/>
Operator change	<input type="checkbox"/>	Non-transporter	<input type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE			
Lease Name	Hobbs "T"	Well No.	6
Pool Name, Including Formation	Chaveroo - San Andres		Kind of Lease
			State, Federal or Deed
Section	A	660	North
Foot From The	33	Township	7-S
Range	33-E	County	Roosevelt

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil	Magnolia Pipeline Company	Address (Give address to which approved copy of this form is to be sent)	
		Box 900 - Dallas, Texas	
Name of Authorized Transporter of Gas, Condensate or Dry Gas	None - Vented	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.
	F	33	7-S
			33-E
Is gas actually connected?	NO	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
X			X
Date of Completion	Date Compl. Ready to Prod.	Total Depth	PERF. D.
9 - 16 - 65	9 - 30 - 65	4475'	4437
Formation	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Chaveroo - San Andres	San Andres	4267'	4445
Perforations			Depth Casing Shoe
4267 - 4345' (Intervals) - San Andres			4475
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
11	8-5/8"	375	250
7-7/8	4-1/2"	4474	350
-	2-3/8"	4445	-

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.)	
9 - 30 - 65	9 - 30 - 65	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	60	Packer	26/64"
A shut-in pressure during test	Oil-Bbls.	Water-Bbls.	Gas-MCF
222	222	0	170

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

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 19__	
(ORIGINAL SIGNED) H. E. Aab		BY _____	
District Superintendent		TITLE _____	
10 - 1 - 65		This form is to be filed in compliance with RULE 1104.	
(Title)		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.	
(Date)		All sections of this form must be filled out completely for allowable on new and recompleted wells.	
		Fill out Sections I, II, III, and VI only for changes of well name or number, or transporter, or other such change of conditions.	
		Separate Forms C-104 must be filed for each pool in completed wells.	