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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-110
Effective 1-1-65

I. Operator

Skelly Oil Company

Address

P. O. Box 730 - Hobbs, New Mexico

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)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Hobbs "W"	3	Chaveroo San Andres	State, Federal or Fee	K-1370
Location				
Unit Letter		Feet From The	Line and	Feet From The
"G"	1650	North	1980	East
Line of Section	Township	Range	NMPM,	County
30	7-8	34-E	Roosevelt	

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)			
The Permian Corporation	P.O. Box 3119 - Midland, Texas			
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)			
None - Vented	-----			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
	"A"	30	78	34E
Is gas actually connected?	When			
No	-----			

If this production is commingling 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 Res'tv.	Diff. Res'tv.
X	X							
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
August 19, 1966	September 5, 1966	4475'	4439'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
4322' DF	San Andres	4197'	4089'					
Perforations	Depth Casing Shoe							
4197-4337' - Intervals - San Andres	4475'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8"		368'		250			
7-7/8"	4-1/2"		4475'		350			
-----	2-3/8"		4089'		----			

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.)	
September 1, 1966	September 8, 1966	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours	85#	650#	32/64"
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
286	283	3	89

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.

J. W. George
(Signature)
Asst. District Superintendent
(Title)
September 7, 1966
(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 completed wells.