

DISTRIBUTION	
SANTA FE	
FILE	
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-101
Superseding Old C-101 and C-1
Effective 1-1-65

Operator
Getty Oil Company

Address
Drawer DD, Levelland, Texas 79336

Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of: ☐		
Recompletion ☐	Oil ☐	Dry Gas ☐	
Change in Ownership ☐	Casinghead Gas ☒	Condensate ☐	

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE			
Lease Name Hobbs W	Well No. 6	Pool Name, including Formation Chaveroo San Andres	Kind of Lease ☒ State ☐ Federal or Fee
Lease No. K-1370			
Location			
Unit Letter D	330	Feet From The North	Line and 467
Feet From The West			
Line of Section 29	Township 7S	Range 34E	N.M.P.M., Roosevelt County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)		
Mobil Pipeline Company	P. O. Box 900 Dallas, Texas 75221		
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)		
Cities Service Company	P. O. Box 1919 Midland, Texas 79701		
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 30	Twp. 7S
			Rge. 34E
Is gas actually connected?		When	
Yes		1-12-67	

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

COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
			Workover
			Deepen
			Plug Back
			Same Res'v.
			Diff. Res'
Date Spudded	Date Compl. Ready to Prod.		Total Depth
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay
Perforations			Tubing Depth
			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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-Bbls.	Water-Bbls.	Gas-MCF

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

I. 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.	
<u>P. J. Wade</u> (Signature)	C. L. Wade
Area Superintendent	
(Title)	
February 6, 1978	
(Date)	

OIL CONSERVATION COMMISSION	
FEB 12 1978	
APPROVED	19
BY	Orig. Signed By
	Terry Sexton
	Dist. L. Supv.
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 deviate tests taken on the well in accordance with RULE 111.	
All portions of this form must be filled out completely for all wells on new and recompleted wells.	
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions.	

1-10-78

FEB 9 1978
OIL CONSERVATION COMM.
FIDEL, N. M.