

Oil Conservation Commission	
Form No. 1	
January 1983	
Oil	
Gas	
Transporter	
Oil	
Gas	
Transporter	
Oil	
Gas	
Transporter	

OIL CONSERVATION DIVISION
P. O. BOX 2048
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
MURPHY OPERATING CORPORATION

Address
200 West First Street - Fourth Floor, P. O. Box 2248, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change In Transporter of ☐

Recompletion ☐ Oil ☐ Dry Gas ☐ Change Effective January 1, 1983

Change In Ownership ☒ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner LAYTON ENTERPRISES, INC., 3103 - 79th Street, Lubbock, Texas 79423

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Gates State	4	Todd Lower San Andres	State, Federal or Fee State	K-3582

Location

Unit Letter E : 1830 Feet From The North Line and 660 Feet From The West

Line of Section 32 Township 7S Range 36E NMPM 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 Pipe Line 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 Oil Company Bluff Gasoline Plant, Milnesand, NM 88125

If well produces oil or liquids, give location of tanks.

Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
D	32	7S	36E	Yes	

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

COMPLETION DATA

Designate Type of Completion - (X)

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 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 lost oil and must be equal to or exceed top oil able 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/MCF	Gravity of Condensate

Testing Method (flow, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Ann J. Murphy
(Signature)
President, Murphy Operating Corporation
(Title)
12-20-82
(Date)

OIL CONSERVATION COMMISSION
JAN 24 1983
APPROVED
BY EDDIE W. SEAY
OIL & GAS INSPECTOR
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 shut-in tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable and not just 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 conditions.