SISTRIBUTION SI TA FE SISTRIBUTION SI TA FE SISTRIBUTION TRANSPORTER OIL	REQ	OIL CONSERVATION COMMISSIO UEST FOR ALLOWABLE AND O TRANSPORT OIL AND NATU	Supersedes Old C-104 and C-
GAS OPERATOR I. PRORATION OFFICE Cperator Getty Oil Company			
Address			
P. O.Drawer DD, I Reason(s) for filing (Check proj New Well	evelland, Texas 79336	Other (Please explai	
Recompletion	Casinghead Gas		wable: For approximately
If change of ownership give n and address of previous owner	ame 		
II. DESCRIPTION OF WELL			
E. N. Taylor Etal	"30" 1 N. Petersor	icina o.	Lease Lease No. Federal or Fee Fee
Unit Letter <u>B</u> ;	660 Feet From The North	_Line andFeet ;	From The East
Line of Section 30	Township 4S Range	<u>33-E , NMFM,</u> Ro	osevelt
III. DESIGNATION OF TRANSF		Address (Give address to which a	approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas or Dry Gas Authorized Transporter of Casinghead Gas or Dry Gas Authorized Transporter of Casinghead Gas to bry Gas		ston, Texas 77001	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Age. B 30 4S 33E	Is gas actually connected?	when
If this production is commingled IV. COMPLETION DATA Dry	with that from any other lease or po	ol, give commingling order number:	
Designate Type of Compl	TOTION	•	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc	.) Name of Producing Formation	Top Oll/Gas Pay	
Perforations			Tubing Depth
	TUDING CLEW		Depth Casing Shoe
HOLE SIZE	CASING & TUBING SIZE	ND CEMENTING RECORD	SACKS CEMENT
			SACKS CEMENT
7. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be able for this	after recovery of total volume of load c	bil and must be equal to or exceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oll-Bbls.	Water - Bbls.	Choke Size
[ndter-Bbis,	Gas-MCF
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
. CERTIFICATE OF COMPLIAN			ATION 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 JUN O 1982	
		TITLE AND AND A SU	
Clark Richards Clark Richards		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened	
Associate Engineer		tests taken on the well in accordance with RULE 111.	
(Title)		and our new and recompleted me	
(Date)		well name or number, or transport	. III, and VI for changes of owner, er, or other such change of condition.