

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

FILE	
INTER	OIL
	GAS
FOR	
ATION OFFICE	

Getty Oil Company

P.O. Drawer DD, Levelland, Texas 79336

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

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.
State "O"	23	Lovington Drinkard	(State) Federal or Fee	B-7896
Location				
Unit Letter	P	990 Feet From The	South	Line and 990 Feet From The
Line of Section	31	Township	16S	Range 37E
			NMPM,	Lea County

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)					
Texas - New Mexico Pipeline Company	P.O. Box 1510, Midland, Texas 79702					
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)					
Phillips Petroleum Company	Phillips Bldg., Odessa, Texas 79760					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	31	16-S	37-E	yes	unknown

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	Ne. Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
						X		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
9-21-54	8-22-79	8440	8080					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Test Day/Gas Pay	Tubing Depth					
DF 3823	Drinkard	7822						
Perforations	7822 to 7923					Depth Casing Shoe		
			8440					
TUBING, CASING, AND CEMENT RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACRED		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of fluid from well and must be able for this depth or less for full 24 hrs.)

Date First New Oil Run To Tanks	Date of Test	Production Method (Flow, pump, gas lift, etc.)	
8-22-79	8-27-79	pumping	
Length of Test	Tubing Pressure	Shut-in	
24	---	---	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	MCF
59	55	4	167

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.

E. P. Morales

(Signature)

area engineer

(Title)

8-29-79

(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 6 1979
BY
SUPERVISOR DISTRICT

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 data of condition.