

STRICTION		
A FE		
G.S.		
D OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

AUTHORIZATION TO DEVIATE OIL AND NATURAL GAS

Operator	Getty Oil Company	
Address	P. O. Box 1351, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of <input type="checkbox"/>	Change of lease name Formerly: H. B. McKinley
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name (if different)	Kind of Lease	Lease No.
H. B. McKinley "A"	1	Hobbs (G.-S.A.)	State, Federal, Fee	
Location				
Unit Letter D	330	Feet From The North	330	Feet West
Line of Section 20	Township 10S	Range 30E	NMPM, County	

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	(Give address to which copies of this form is to be sent)
Shell Pipeline Co.	P. O. Box 2648, Houston, Tx 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	(Give address to which copies of this form is to be sent)
Phillips Petroleum Co.	Phillips Building, Odessa, Tx 79760
If well produces oil or liquids, give location of tanks.	Are they connected? Yes ?

If this production is commingled with that from any other lease or pool

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/>	Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	
Perforations		
TUBING, CASING, ETC.		
HOLE SIZE	CASING & TUBING SIZE	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks	Date of Test
Length of Test	Tubing Pressure
Actual Prod. During Test	Oil-Bbls.
(Test must be allowable for this purpose)	

GAS WELL

Actual Prod. Test-MCF/D	Length of Test
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)
Casinghead Gas (MCF) Gravity of Condensate	
Shut-in Pressure (shut-in) Bore 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

(SIGNED) LELAND FRANZ Leland Franz
(Signature)
District Production Manager
(Title)
February 11, 1977
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
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 data 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, name or number, or transporter or other such change of condition.