1.	INTEGRETION Dim Council V 1ATE REQUESTION Dim Council G.S. AND VOLUTION 10 TRANSPORT OIL AND NATURAL GAS						
	Operator Getty 011 Company						
	Address						
	Reason(s) for filing (Check proper box) Other (Please explain)						
	Now Well Change in Transporter of: Skelly Oil Company merged with Getty Recompletion Oil Dry Gas Oil Company effective 1-31-77 Change in Ownership X Casinghead Gas Condensate Oil Company effective 1-31-77						
	If change of ownership give name and address of previous owner	Skelly Oil Company,	, P. O. Box 135	L, Midland,	Texas 7970	2	
н.	DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease						
	Lovington San Andres U	Ma		State Federal or	Fee	B-2359	
	Unit Letter N: 66	O Feet From The SOUTH Lin	na and 1980	Feet From The	West	<i>J</i>	
		• · · · · · · · · · · · · · · · · · · ·	36-E , NMPN			County	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL G	45				
	Name of Authorized Transporter of Oil Texas-New Mexico Pipel:		Address (Give address			-	
	Name of Authorized Transporter of Casinghead Gas 🔀 👘 or Dry Gas 🛄		P. O. Box 1510, Midland, Texas 79702 Address (Live address to which approved copy of this form is to be sent)				
	Phillips Petroleum Com	Dany Unit Sec. Twp. Pye.	Phillips Build Is gas actually connect	ing, Odessa ed? When	<u>Texas 797</u>	760	
	give location of tanks. B 1 175 36E Yes UNKNOWN						
IV.	f this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.						
	Designate Type of Completio		New Well Workover	Deepen Pl	ug Back Same Re 	s'v. Difl, Res'v.	
	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	Τυ	bing Depth		
	Perforations	L		De	pth Casing Shoe	·····	
		TUBING, CASING, AND CEMENTING RECORD					
	HOLESIZE	CASING & TUBING SIZE	DEPTH SI		SACKS CEN	MENT	
:	· · · · · · · · · · · · · · · · · · ·		-		, 		
				-			
v.	TEST DATA AND REQUEST FO		fier recovery of total volu opth or be for full 24 hours	me of load oil and n	nust be equal to or	exceed top allow-	
	DH. WELL able for this cepth or be for full 24 hours) Date First New Oil Run To Tanks Date of Test Preducing Method (Flow, pump, gas lift, etc.)						
	Length of Test	Tubing Pressure	Casing Pressure	Ch	oke Size		
	Actual Prod, During Test	Oil-Bbls,	Water - Bbla.	Ga	a - MCF		
1	GAS WELL Actual Prod. Tost-MCF/D	Length of Test	The Contract (A)(C)				
	Actual Prod. 1881-MCF7D	L'engin of l'est	Bble. Condensate/MMCF	Gro	avity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Processo (Shut-in)	Casing Pressure (Chut-	-in) Chi	oke Sizo		
¥I.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION				
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED FEB 9 1977				
	above is true and complete to the best of my knowledge and belief.		BY Grig. Signed by Jerry Sexton				
			TITLE Dist 1, Supv.				
	(SICI (SIC) (SIC)	This form is to be filed in compliance with KULE 1104. If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with KULE 111.					
-	(Signature) LeLand Franz						
•	District Production Manager (rule)		All sections of this form must be filled out completely for allow- shie on new and iscompleted walls.				
•	February 1, 1977 (Date)		Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.				
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