

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-104A Effective 1-1-65	
OPERATOR Getty Oil Company		PRODUCTION OFFICE	
ADDRESS P. O. Box 1351, Midland, Texas 79702		REASON(S) FOR FILING (Check proper box)	
Other (Please explain) Skelly Oil Company merged with Getty Oil Company effective 1-31-77		New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/>	
If change of ownership give name and address of previous owner Skelly Oil Company, P. O. Box 1351, Midland, Texas 79702		Change in Transporter of: Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
DESCRIPTION OF WELL AND LEASE			
Lease Name Lovington San Andres Unit		Well No. 41	
Pool Name, including Formation Lovington San Andres		Kind of Lease State Federal or Fee	
Location Unit Letter G 1980 Feet From The NORTH Line and 1980 Feet From The EAST		Lease No. B-2359	
Line of Section 1 Township 17-S Range 36-E, NMPM, Lea County			
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipeline Company		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1510, Midland, Texas 79702	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company		Address (Give address to which approved copy of this form is to be sent) Phillips Building, Odessa, Texas 79760	
If well produces oil or liquids, give location of tanks. Unit B Sec. 1 Twp. 17S Rge. 36E		Is gas actually connected? When Yes UNKNOWN	
If this production is commingled with that from any other lease or pool, give commingling order number:			
V. COMPLETION DATA			
Designate Type of Completion - (X)		Oil Well Gas Well New Well Workover Deepen Plug Back Same Res. Diff. Res.	
Date Spudded		Date Compl. Ready to Prod.	
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation	
Perforations		Top Oil/Gas Pay	
		Tubing Depth	
		Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE		CASING & TUBING SIZE	
		DEPTH SET	
		SACKS CEMENT	
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)			
Date First New Oil Run To Tanks		Date of Test	
Length of Test		Producing Method (Flow, pump, gas lift, etc.)	
Actual Prod. During Test		Tubing Pressure	
		Casing Pressure	
		Choke Size	
		Water-Bble.	
		Gas-MCF	
GAS WELL			
Actual Prod. Test-MCF/D		Length of Test	
Testing Method (pitot, back pr.)		Tubing Pressure (Inlet-In)	
		Casing Pressure (Inlet-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.		OIL CONSERVATION COMMISSION APPROVED FEB 9 1977	
(SIGNED) BELAND FRANZ		BY Jerry Sexton	
(Signature) Beland Franz		Dist. 1, Range	
District Production Manager		TITLE	
February 1, 1977		This form is to be filed in compliance with RULE 1104.	
(Date)		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 taken 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 such change of condition.	