## NEW MEXICO OIL CORSCIPVATION COMMISSION TAIL Dam C+104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and ( AND Effective 1-1-65 G.3. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ID OFFICE OIL THANSPORTER OPERATOR PRORATION OFFICE Getty 011 Company Address 0. Box 1351, Midland, Texas 79702 Reason(s) for liling (Check proper box) Other (Please explain) New Well Change in Transporter of: Skelly Oil Company merged with Getty Recompletion OII Dry Gas Oil Company effective 1-31-77 Change in Ownership X Casinghead Gas Condensate If change of ownership give name Skelly Oil Company, P. O. Box 1351, Midland, Texas and address of previous owner II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, including Formation Lease Nan Kind of Lease Lease No. Lovington Paddock Unit 82 Lovington Paddock State, Federal or Fee 6-1563 Location 660 South Unit Letter Feet From The Feet From The EAST Line of Section Township 17-5 Range 36-E , NMPM, Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil or Condensate Address (Give address to which approved copy of this form is to be sent) None - Input Name of Authorized Transporter of Casinghead Gas ... or Dry Gas Address (Give address to which approved copy of this form is to be sent) None Twp. If well produces oil or liquids, give location of tanks. P.ge. Is gas actually connected? If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oll Well Gas Well Workover Plug Back Same Res'v. Diff. Res Deepen Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas iift, etc.) Length of Test Tubing Pressure Casing Pressure Choke Size Actual Frod. During Test Oli-Bbls. Water - Bble. Gas - MCF GAS WELL Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate Testing Method (putet, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Phut-in) Cheke Size VI. CERTIFICATE OF COMPLIANCE OIL COMSERVATION COMMISSION APPROVED I hereby certify that the rules and regulations of the Oil Convervation Commission have been complied with and that the information given shove is time and complete to the best of my knowledge and belief. Orig. Signed by Jerry Sexton Dist I, Supv. This form is to be filed in compliance with RULE 1104. (SIGNED) LELAND TORREST If this is a request for allowable for a newly dillied or deepened (Signature) Lie Land Franz well, this form must be accompanied by a tribulation of the deviation tests taken on the wall in accordance with him. s. 111. District Production Manager All nections of this form must be filled out completely for allow-(Tale)

alds on now and recompleted walls.

Fill out only Sections I. H. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

February 1, 1977

(Date)

## RECEIVED

PEB 1 : 1977

OIL COMSERVATION COUNTY