

STATE OF TEXAS
OIL AND NATURAL GAS
DEPARTMENT OF COMMERCE
REGULATORY DIVISION
AND
AUTORIZATION TO TRANSPORT OIL AND NATURAL GAS

TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Form C-104
Supersedes Old C-101 and C-102
Effective 1-1-65

I. OPERATOR
Operator: Getty Oil Company
Address: P. O. Box 1351, Midland, Texas 79702
Reason(s) for filing (Check proper box):
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☒ Other (Please explain): Skelly Oil Company merged with Getty Oil Company effective 1-31-77
If change of ownership give name and address of previous owner: Skelly Oil Company, P. O. Box 1351, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE
Lease Name: Lovington Paddock Unit Well No.: 67 Pool Name, including Formation: Lovington Paddock Kind of Lease: State, Federal or Fee Lease No.:
Location: Unit Letter L; 2310 Feet From The South Line and 640 Feet From The WEST Line of Section 6 Township 17-S Range 37-E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐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 ☒ or Dry Gas ☐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? Yes When UNKNOWN

If this production is commingling with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA
Designate Type of Completion - (X) ☒ Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Rest. Diff. Rest.
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 Shoes:
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 allowable 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 lift, etc.):
Length of Test: Tubing Pressure: Casing Pressure: Choke Size:
Actual Prod. During Test: Oil-Bbls.: Water-Bbls.: Gas-MCF:
GAS WELL
Actual Prod. Test-MCF/D: Length of Test: Bbls. Condensate/MMCF: Gravity of Condensate:
Testing Method (flow, back pr.): Tubing Pressure (Ghat-in): Casing Pressure (Ghat-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.
(SIGNED) Leland Franz
(Signature) Leland Franz
District Production Manager
February 1, 1977
(Date)

OIL CONSERVATION COMMISSION
FEB 15 1977
APPROVED: _____, 19____
BY: Chas. Signed by
Jerry Saxon
TITLE: Director
This form is to be filled 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 or 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.