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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		
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	DISTRIBUTION	NEWASYICO	CONSTRUCTION COMMISSION	S_
	SANTA FE		CONSERVATION COMMISSION	Form C-104
		REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
	FILE	4	AND	
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS 30
	LAND OFFICE			
	OIL			
	TRANSPORTER	-		
	GAS			
	OPERATOR			
	PRORATION OFFICE			
1.	Operator	<u> </u>		
	Skelly Oil Co			
		aupany		
	Address			
	P. O. Box 730	- Hobbs, New Mexico		
	Reason(s) for filing (Check proper box		Other (Please explain)	
	· —		Other (Flease explain)	
	New Well	Change in Transporter of:	Well taken into	the Lovington Paddock
	Recompletion	Oil Dry G	1 ! !	October 1, 1966.
	Change in Ownership		E DILLE GY YELETAGE	account 1, 1900.
	Change in Ownership	Casinghead Gas Conde	ensate	
	If change of ownership give name			
	and address of previous owner	Ashland O.1 and Roft	ning Company, Houston, T	exac
		Formerly C. S. Caylo	r No. 5	
11.	DESCRIPTION OF WELL AND	LEASE		
	Lease Name	Well No. Pool Name, Including	Formation Kind of Leas	Lease No.
	Lovington Paddock Unit	Tourism D	State, Federa	ıl or Fee
		51 Lovington Pa	SECOCK STATES	- Ped-
	Location			
		IAA Past Pass Who was a see	ine and ABB Park P	The Wareh
	Unit Letter;;	Feet From The Rest Li	ne and Feet From	The
				_
	Line of Section Tov	wnship 199 Range	, NMPM,	Lea County
		310		
***	DESIGNATION OF TRANSPORT	FED OF OH AND NATURAL C	AC	
111.	DESIGNATION OF TRANSPORT		A3 Address (Give address to which appro	
	Name of Authorized Transporter of Oil		1	
	Texas-New Mexico Pip	e Lino Company	F. O. Box 1510 - Midlar	id. Texas
	Name of Authorized Transporter of Cas	•	Address (Give address to which appro	
		3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
	Skelly Oil Company		P. C. Box 1135 - Eunice	e, New Mexico
	Tf	Unit Sec. Twp. Fige.	Is gas actually connected? Wh	en
	If well produces oil or liquids, give location of tanks.		Yes	
	give location of tanks.	. C	1 W G	•
				
	If this production is commingled wit	th that from any other lease or pool	, give commingling order number:	
	If this production is commingled with COMPLETION DATA	th that from any other lease or pool	, give commingling order number:	
	COMPLETION DATA	Oil Well Gas Well	give commingling order number: New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
		Oil Well Gas Well		Plug Back Same Resty. Diff. Resty.
	Designate Type of Completic	on - (X) Gas Well	New Well Workover Deepen	
	COMPLETION DATA	Oil Well Gas Well		Plug Back Same Resty. Diff. Resty.
	Designate Type of Completic	on - (X) Gas Well	New Well Workover Deepen	
	Designate Type of Completic	on - (X) Gas Well Date Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D.
	Designate Type of Completic	on - (X) Gas Well	New Well Workover Deepen	
	Designate Type of Completic	on - (X) Gas Well Date Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D.
	Designate Type of Completic	on - (X) Gas Well Date Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D.
	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.)	on - (X) Gas Well Date Compl. Ready to Prod.	New Well Workover Deepen Total Depth	P.B.T.D. Tubing Depth
	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod. Name of Producing Formation	New Well Workover Deepen Total Depth Top Oil/Gas Pay	P.B.T.D. Tubing Depth
	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod. Name of Producing Formation	New Well Workover Deepen Total Depth	P.B.T.D. Tubing Depth
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	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN	New Well Workover Deepen Total Depth Top Oil/Gas Pay	P.B.T.D. Tubing Depth Depth Casing Shoe
	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN	New Well Workover Deepen Total Depth Top Oil/Gas Pay	P.B.T.D. Tubing Depth Depth Casing Shoe
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IV.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE	New Well Workover Deepen Total Depth Top Oil/Gas Pay ID CEMENTING RECORD DEPTH SET	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
IV.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	Date Compi. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be	New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET after recovery of total volume of load oil	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
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IV.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOLL WELL	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this desired)	New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET after recovery of total volume of load oil lepth or be for full 24 hours)	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow-
IV.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks	Date Compi. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this d	Total Depth Top Oil/Gas Pay ID CEMENTING RECORD DEPTH SET after recovery of total volume of load oil lepth or be for full 24 hours) Producing Method (Flow, pump, gas li	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow- ift, etc.)
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IV.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOL, WELL Date First New Oil Run To Tanks Length of Test	Date Compi. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this d	Total Depth Top Oil/Gas Pay ID CEMENTING RECORD DEPTH SET after recovery of total volume of load oil lepth or be for full 24 hours) Producing Method (Flow, pump, gas li	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow- ift, etc.)
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IV.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test	Date Compi. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this d	New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET DEPTH SET after recovery of total volume of load oil lepth or be for full 24 hours) Producing Method (Flow, pump, gas lice of the control of the co	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow- ift, etc.) Choke Size
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IV.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOR MELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this d Date of Test. Tubing Pressure Oil-Bbls.	New Well Workover Deepen Total Depth Top Oil/Gas Pay DEPTH SET DEPTH SET after recovery of total volume of load oil lepth or be for full 24 hours) Producing Method (Flow, pump, gas li Casing Pressure Water-Bbls. Bbls. Condensate/MMCF	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow- ift, etc.) Choke Size Gas-MCF
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v.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)	Date Compi. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this d Date of Test Tubing Pressure Oil-Bbls. Length of Test Tubing Pressure (Shut-in)	Total Depth Total Depth Top Oil/Gas Pay ID CEMENTING RECORD DEPTH SET after recovery of total volume of load oil lepth or be for full 24 hours) Producing Method (Flow, pump, gas licenter of the second part of the sec	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow- if, etc.) Choke Size Gas-MCF Gravity of Condensate Choke Size
v.	Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE TEST DATA AND REQUEST FOR MELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	Date Compi. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this d Date of Test Tubing Pressure Oil-Bbls. Length of Test Tubing Pressure (Shut-in)	Total Depth Total Depth Top Oil/Gas Pay ID CEMENTING RECORD DEPTH SET after recovery of total volume of load oil lepth or be for full 24 hours) Producing Method (Flow, pump, gas licenter of the second part of the sec	P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT and must be equal to or exceed top allow- ift, etc.) Choke Size Gas-MCF
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VI.

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

R	8	al	
Dis	crint.	(Signature) Super in condect	
Oct	ober 1	Title)	

(Date)

APPROVED Ct	gber 15,	19 66
Tol at	Janes	 ノ
Supervis	or, District No	o. 1

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 tests 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.