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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
6-NMOCC
1-File

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator GETTY OIL COMPANY	
Address P. O. BOX 249, HOBBS, NEW MEXICO 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name STATE "BA"	Well No. 6	Pool Name, Including Formation VACUUM UPPER PENN	Kind of Lease State, Federal or Fee STATE	Lease No. B-1565
Location				
Unit Letter D ; 660 Feet From The NORTH Line and 860 Feet From The WEST				
Line of Section 36 Township 17-S Range 34-E , NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
TEXAS-NEW MEXICO PIPE LINE COMPANY	P.O. BOX 1510, MIDLAND, TEXAS 79701					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
PHILLIPS PETROLEUM COMPANY	PHILLIPS BUILDING, ODESSA, TEXAS 79760					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 36	Twp. 17	Rge. 34	Is gas actually connected? YES	When 10-15-72

If this production is commingled with that from any other lease or pool, give commingling order number: R-4406

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well	Workover XX	Deepen	Plug Back	Same Res'v.	Diff. Res'v. XX
Date 8-15-72 Rework 10-3-72	Date Compl. Ready to Prod. 10-15-72	Total Depth		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation UPPER PENN	Top Oil/Gas Pay 10,121		Tubing Depth 10,045				
Perforations 10,121 - 10,134 (14 HOLES - 1 PER FT)		Depth Casing Shoe 12,109						
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 10-15-72	Date of Test 10-16-72	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24	Tubing Pressure =====	Casing Pressure =====	Choke Size 2"
Actual Prod. During Test 151	Oil-Bbls. 66	Water-Bbls. 85	Gas-MCF TSTM

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-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.

C. L. WADE:

(Signature)

AREA SUPERINTENDENT

(Title)

OCTOBER 16, 1972

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 18 1972, 19

BY [Signature]

TITLE [Signature]

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.

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OCT 17 1972

OIL CONSERVATION COMM.
HOUSTON, TEX.