BEATE OF NEW MEXICO HERIGY AND MINERALS DEPARTMENT 00 00 00010 0000110 DISTRIBUTION ·11. u.s.u.s. LAND OFFICE IMAHIPOMIEM **AUTHORIZATION TO TRANSF** DFEHALOR PADRATION OFFICE Minerals, Inc. P. O. Box 1320, Hobbs, New Mexico 88240 Reason(s) for liling (Check proper box) Change in Transporter of: Dry Ga Csi Recompletion Conder Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner I. DESCRIPTION OF WELL AND LEASE
Well No. | Fool Name, Including Fo Pearl Queen 1 Minerals State Location 1650 Feet From The West Lin Ŋ Unit Letter_ Range 34 T mahip 195 Line of Section 36 I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GA Name of Authorized Transporter of CII XX Getty Trading and Transportation Company Name of Authorized Transporter of Casinghead Gas X or Dry Gas Phillips Petroleum Company Twp. Rge. Unit If well produces oil or liquids, give location of tanks. | <u>N</u> 36 If this production is commingled with that from any other lease or pool, . COMPLETION DATA Oil Well Designate Type of Completion - (X) Date Compl. Ready to Prod. Date Soudded Name of Producing Formation Elevations (DF. RKB. RT. GR. etc.) Perforations TUBING, CASING, AND CASING & TUBING SIZE HOLE SIZE . TEST DATA AND REQUEST FOR ALLOWABLE Test must be a OIL WELL Date First New Oil Run To Tanks Date of Test Tubing Pressure Length of Test Actual Prod. During Test CII-bale. GAS WELL Actual Prod. Tool-MCF/D Length of Test Tubing Pressur (Shut-in) Testing biethod (pitot, back pr.) . CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Vice President,

Engineering

(Tule)

Dutel

1/11/83

OIL CONSERVATION DIVISION P. O. HOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR

	ALLOWABLE					
PORT OIL AND NATURAL GAS						
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Other (Please explain) effective 1-1-83						
Western Crude Oil, Inc. name changed to Getty Trading and Transportation Co.						
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-	rmation	Kind of Lease State, Federal	∘rF•• Sta	te	E-6005	
•	and 990	Feet From T	h•S	outh		
ŀ	E , NMPM	ı, Le	ea .		County	
•	<u> </u>					
Address (Give address to which approved copy of this form is to be sent)						
ш	P.O. Box 1142, Midland, Texas 79702 Address (Give address to which approved copy of this form is to be sent)					
	Bartlesville, Oklahoma Is gas actually connected? When					
Yes 12/24/69						
١	give commingling orde					
1	New Well Workover	Deepen	Plug Back	Same Res'v.	'Diff. Res'v. !	
	Total Depth		P.B.T.D.	<u> </u>	<u> </u>	
Top Oil/Gas Pay			Tubing Depth			
_			Depth Casin	g Shoe	ı	
O CEMENTING RECORD						
	DEPTH S		SA	CKS CEME:	4T	
	 				<u> </u>	
_						
,	ter recovery of total vali oth or be far full 24 hour	ume of load oil s	ind must be eq	ual to or exc	eed top allow	
Producing Method (Flow, pump, gas lift, etc.)						
	Casing Pressure		Choke Size			
-	Water-Bbls.		Gas-MCF			
_	Bale. Condensate/MMC	er .	Gravity of C	Conceneate		
-	Casing Pressure (Shut	Chote Sixe				
	OIL CONSERVATION DIVISION					
	APPROVED					
j	TITLE OIL & GAS INSPECTOR This form is to be filed in compliance with RULE 1994. If this is a request for allowable for a newly drilled or despending the form must be accompenied by a tabulation of the deviations taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable to the section of the section.					
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1						

able on new and recompleted wells.

Fill out only factions t, il, ill, and VI for changes of numberal name or number, or transporter, or other such change of condition

Separate Forms C-104 must be filled for each pool in multiple completed wells.