NO. OF COPIES RECEIVED	-
DISTRIBUTION	EW MEXICO OIL
SANTA FE	REQUEST
FILE	
U.S.G.S.	AUTHORIZATION TO TR
LAND OFFICE	
IRANSPORTER GAS	
OPERATOR	
PRORATION OFFICE) Company
A.I.	r 249, Hobbs, Tou Mexico
Reason's) for filing (Check proper)	
New Well	Change in Transporter of:
Recompletion	Ci. Dry C
Change in Ownership	Casinghead Gas Cond
change of ownership give name nd address of previous owner _	e Tidewater Old Company,
DESCRIPTION OF WELL AN	IN I FASE
Lease Name	Well its Foot dame, including arkeys 3 Blinebr
Location	ney u
Unit Letter C ·	1980 Feet From The West L
	
Line of Section 26	Township 21S Range
Name or Authorized Transporter of	Traingher of Per Co.
Skelly	Crainghers Fer William Dry Glastick
Skelly (If well produces oil or liquids,	Crainghand Part College IV to Bry Guater V. College IV
Skelly (If well groduces oil or liquids, give location of tanks. If this production is commingled	Crainghers Fer William Dry Glastick
Skelly (If well produces oil or liquids, give location of tanks.	Crainghard For Get IV: Bry Glaster Oil Co. SECTION Of CO. SEAN Unit INFO GET TWO OURSESS C 26 21 37
Skelly (If well groduces oil or liquids, give location of tanks. If this production is commingled	Oil Co. SKELLY Of COMPAN Unit INFO GE TW. OHRSON C 26 21 37 with that from any other lease or poo
Skelly (If well produces oil or liquids, give location of tanks. If this production is commingled COMPLETION DATA	Oil Co. SKELLY Of COMPAN Unit INFO GE TW. OHRSON C 26 21 37 with that from any other lease or poo
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SANTA FE	1	FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110
FILE		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL	GAS
LAND OFFICE	<u> </u>		•
TRANSPORTER GAS			
OPERATOR	1		
PROBATION OFFICE	1		
Operator Getty Oll	Conpeny		
Address	2) 2 22 24 24 2 26	6 l-0	
P. C. Box	249, Hobbs, Thu Mexico 88		
Reasons) for filing (Check proper box		Other (Press Inchase)	
New Well	Change in Transporter of: Oil Dry Gas		:
Change in Ownership	Casinghead Gas Condens		
	Tidewater Old Company, I	0. One Sec. 18 bbs. 1	les Hexten 88240
If change of ownership give name and address of previous owner	Tidesaver VI. Conjeny,	- V1 1000 2-7, 100000 1	
	I EACE		
DESCRIPTION OF WELL AND Lease Name	Veil No. Fool Mane, including Fo	rmation Kani of Le	Lease No.
S. J. Sar	keys 3 Blinebry	State, Fede	ral or line Fee
Location		(/_	Wa web b
Unit Letter C - 198	BO Feet From The West Line	and 660 Feet From	The North
1 lma of Constant 04 T-	wnship 215 Range	37E / SYTEM	Lea County
Line of Section 26 To	A copyright		
	TER OF OIL AND NATURAL GA	S - C - J- co to think and	roved copy of this form is to be sent)
Name of Authorized Transporter of Cu	Mexico Pipeline Co.	Box 1510, Hidlen	i, Texas
Name or Authorized Transporter of Ca	angherd Park IV to Dily Cha Hell 31	· Address Give address ·) which app	roved copy of this form is to be sent;
Skelly Oi	 And the second of the first of the second of	Box 1135, Emmice	e, New Mexico
If well produces oil or liquids,	Unit INFO GE TW. OHAGOMI	is das actually connected?	Then
give location of tanks.	d 26 21 37	Yes	
	th that from any other lease or pool,	give commingling or 'er number	
COMPLETION DATA	ON Wo Gas Well	New Well Workshot Leefon	Find Back - Same Rest. Diff. Rest.
Designate Type of Completi	on = (X)	<u> </u>	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	(F.A.T.D.
Elevations (DF, RKB, R1, GR, etc.)	Name of Producing Termation	Top Cil. Gas Pay	Tirm Cepth
Elevations IDF, RKB, KI, GR, etc.;	The or field in the same of th		
Perforations			Courth Orsing Shoe
		CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	<u>DL</u>	
	<u>i</u>		and the second s
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a) able for this de	ter recovery of total talume of load of pth or be for full 24 hours)	il and must be equal to or exceed top allow
OIL WELL Date First New Oil Bun To Tanks	Date of Test	Producing Method Fore, nump, gas	lift, etc.)
			Dheke Size
Length of Test	Tubing Pressure	Casing Pressure	3 (CAU 0.60
Actual Prod. During Test	C11-3b15	Water-Bbis.	Gus - MOF
Notion Floor Partity . and			
GAS WELL		Bbls. Condensate AMADE	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate	1
Testing Method (pitot, back pr.)	Tubing Freesure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
, earling stated (prior) odd (prior)			
CERTIFICATE OF COMPLIAN	CE	O'L CONSER	VATION COMMISSION
		Anna Car	- 19 <u>- 19</u>
Ci-si been complied	regulations of the Oil Conservation with and that the information given	APPROVED	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY TO	
		TITLE	
		11 7	in compliance with AULT 1104.
12 11 111	'n Le		tomable for a newly drilled or deepene
(Signature) Airos Superfucendent (Title) September 30, 1967		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 allow	
			Date:
71	> (4) (4)	Separate Froms C-104 fi	oust be filed for each pool in multipl
		, completed wells.	