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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-105
Effective 1-1-65

AUG 5 8 49 AM '68

I. OPERATOR

Operator: Humble Oil & Refg Co

Address: Box 1600 - Midland, Texas 79701

Reasons for filing (Check proper box)

New Well	☐	Change in Transporter of:		Other (Please explain)
Remediation	☐	Oil	☐	<u>Change Bty Location</u>
Change in Ownership	☐	Casinghead Gas	☒	
		Dry Gas	☐	
		Condensate	☐	

If change of ownership give name and address of previous owner

CHANGE OPERATOR NAME FROM
HUMBLE OIL & REFINING COMPANY

TO
GETTY OIL COMPANY
EFFECTIVE JANUARY 31, 1977

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
<u>Paddock (San Angelo) Unit</u>	<u>5</u>	<u>Paddock</u>	State, Federal or <u>Fee</u>
Location			
Unit Letter: <u>O</u> ; <u>710</u> Feet From The <u>S</u> Line and <u>2040</u> Feet From The <u>E</u>			
Line of Section: <u>35</u> , Township <u>21-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Texas N. Mex. P.L. Co.</u>	<u>Box 1510 - Midland Texas</u>
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Skelly Oil Co.</u> <u>Warren Ref Co.</u>	<u>Box 1135 - Eunice, NM</u> <u>✓ 1197</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>N</u> <u>2</u> <u>22-S</u> <u>37-E</u> <u>Yes</u> <u>6-1-68</u>

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

EFFECTIVE JANUARY 31, 1977,
~~SKELLY OIL COMPANY MERGED~~
INTO GETTY OIL COMPANY.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Perforations	Depth Casing Shoe				
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 at least 14 days. If test well must be equal to or exceed top all wells able for this depth or be for full 24 hours.

Date First New Oil Run To Tanks	Date of Test	Producing Method (Pump, 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 (pitot, back pr.)	Tubing Pressure	Casing Pressure	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 is true and correct to the best of my knowledge and belief.

OIL CONSERVATION COMMISSION

AUG 5 1968

APPROVED _____, 19

BY John W. Runyan
Geological
TITLE

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 Sections I, II, III, and VI only 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 multiple completed wells.

Unit Head
(Title)
8-1-68
(Date)