

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

Supersedes Old C-101 and C-110  
Effective 1-1-65

## REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AUG 5 8 49 AM '68

Operator <b>Humble Oil &amp; Refg Co.</b>	
Address <b>Box 1600 - Midland, Texas 79701</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of: <b>Change in Bty Location</b>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/>
	Dry Gas <input type="checkbox"/>
	Condensate <input type="checkbox"/>
If change of ownership give name and address of previous owner	
<b>CHANGE OPERATOR NAME FROM HUMBLE OIL &amp; REFINING COMPANY TO DEXON CORPORATION EFFECTIVE JANUARY 1, 1973</b>	

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Paddock (San Angelo) Unit</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>Paddock</b>	Kind of Lease State, Federal or <b>Fee</b>
Location Unit Letter <b>I</b> ; <b>660</b> Feet From The <b>E</b> Line and <b>1980</b> Feet From The <b>S</b> Line of Section <b>35</b> , Township <b>21-S</b> Range <b>37-E</b> , NMPM, <b>Lea</b> 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"/> <b>Texas New Mexico P.L. Co.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1510 Midland Texas</b>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Skelly Oil Co</b> <b>Wauren Ref Co</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 1135 - Eunice, NM</b> <b>✓ 1197 ✓</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>N</b>	Sec. <b>2</b>
	Twp. <b>22-S</b>	Rge. <b>37-E</b>
	Is gas actually connected? <b>Yes</b>	When <b>6-1-68</b>

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	Same Res. W. Dm. Res'v.
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 after recovery of total volume of fluid 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	Date of Test	Producing Method (Flow, 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

OIL CONSERVATION COMMISSION

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.

APPROVED **AUG 5 1968**, 19  
BY **John W. Runyan**  
TITLE **Geologist****D. J. Runyan**  
(Signature)**Unit Head**  
(Title)**8-1-68**  
(Date)

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.