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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-110
Effective 1-1-65

Operator Bettis, Boyle & Stovall	
Address Box # 1158, Graham, Texas 76046	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in well log <input checked="" type="checkbox"/>	Condensate <input type="checkbox"/> Effective November 1, 1971

If change of ownership give name and address of previous owner **Shell Oil Company, Box 1509, Midland, Texas**

II. DESCRIPTION OF WELL AND LEASE

Lease Name State GRA Com	Well Name, Including Location 1 Grama Ridge (Morrow Gas)	State E-9141
Location Unit Letter E Section 1980 Township N Range 660 Meridian W		
Lease Section 3 Township 22-S Range 34-E County Lea		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Famariss Oil & Refining Company	Box 980, Hobbs, New Mexico 88240
Name of Authorized Transporter of Natural Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	Phillips Bldg., Odessa, Texas 79760
If well produces oil, give location of road	Is gas actually connected? yes When unknown
Unit E Sec. 3 Twp. 22-S Range 37-E	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Old Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Work over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same holey. <input type="checkbox"/> Diff. holey. <input type="checkbox"/>		
Date Operated	Date Compl. Ready to Prod.	Total Depth	Perf. Depth
	Name of Producing Formation	Top Oil/Gas Pay	Perf. Depth
Perforations			Depth Testing 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 load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First Flow - If from To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Flow During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Flow Test-MCF	Length of Test	Bbls. Condensate MCF	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 above is true and complete to the best of my knowledge and belief.

H. M. Bettis (Signature)

Co-owner (Title)

January 5, 1972 (Date)

APPROVED **JAN 10 1972**, 19
BY **Orig. Signed by Joe D. Ramsey**
TITLE **Dist. I, Supv.**

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 multiply