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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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

I. Operator  
**TEXACO Inc.**

Address  
**P.O. Box 728, Hobbs, New Mexico 88240**

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain) <b>Recompleted from Drinkard to Penrose Skelly</b>
Recompletion	<input checked="" type="checkbox"/>	Oil	<input type="checkbox"/>	
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	

Dry Gas ☐  
Condensate ☐

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Mittie Weatherly</b>	Well No. <b>3</b>	Pool Name, Including Formation <b>Penrose-Skelly Grayburg</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No. <b>-</b>
Location Unit Letter <b>C</b> ; <b>660</b> Feet From The <b>North</b> Line and <b>1980</b> Feet From The <b>West</b> Line of Section <b>17</b> Township <b>21S</b> Range <b>37E</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>Shell Pipeline Corp.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1910, Midland, Texas 79701</b>			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Skelly Oil Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1135, Eunice, New Mexico 88231</b>			
If well produces oil or liquids, give location of tanks.	Unit <b>F</b>	Sec. <b>17</b>	Twp. <b>21S</b>	Rge. <b>37E</b>
	Is gas actually connected?		When	
	<b>Yes</b>		<b>September 20, 1971</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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Refracture	Stimulate
	<b>X</b>						
Date Spudded <b>No change</b>	Date Compl. Ready to Prod. <b>September 20, 1971</b>	Total Depth <b>6,651'</b>	P.B.T.D. <b>3,810'</b>				
Elevations (DF, RKB, RT, GR, etc.) <b>3,484' GR</b>	Name of Producing Formation <b>Penrose Skelly Grayburg</b>	Top Oil/Gas Pay <b>3,703'</b>	Tubing Depth <b>3,760'</b>				
Perforations <b>2 JSPF @3703-15, 27-33, 40-49, and 79-96'.</b>			Depth Casing Shoe <b>-</b>				
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
<b>17-1/2"</b>	<b>13-3/8"</b>	<b>314'</b>	<b>325</b>				
<b>11</b>	<b>8-5/8"</b>	<b>2,812'</b>	<b>1,500</b>				
<b>7-7/8</b>	<b>5-1/2"</b>	<b>6,650'</b>	<b>350</b>				

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)

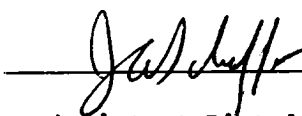
Date First New Oil Run To Tanks <b>Sept. 19, 1971</b>	Date of Test <b>Sept. 20, 1971</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pumping</b>	
Length of Test <b>24 hrs</b>	Tubing Pressure <b>-</b>	Casing Pressure <b>-</b>	Choke Size <b>-</b>
Actual Prod. During Test <b>70 bbls</b>	Oil-Bbls. <b>58</b>	Water-Bbls. <b>12</b>	Gas-MCF <b>209</b>

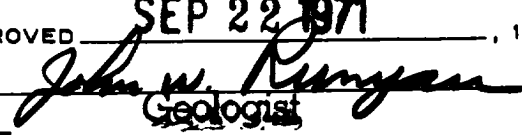
GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	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 above is true and complete to the best of my knowledge and belief.

  
(Signature)  
**Assistant District Superintendent**  
(Title)  
**September 22, 1971**  
(Date)

OIL CONSERVATION COMMISSION  
**SEP 22 1971**  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY   
Geologist  
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 only Sections I, II, III, and VI 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 completed wells.

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OIL CONSERVATION COMM.  
HOBBBS, N. H.