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U.S.G.S.
LAND OFFICE
TRANSPORTER
OIL
GAS
OPERATOR
PRODUCTION 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-116
Effective 7-1-65

I. NAME: Catby Oil Company
ADDRESS: P. O. Box 210, Hobbs, New Mexico 88240
REASON(S) FOR FILING: (Check proper box)
New Well
Recompletion
Change in Ownership
Other (Please explain): Formerly Tidewater GO D. C. Hardy #5
If change of ownership give name and address of previous owner: Skelly Oil Company, P. O. Box 210, Hobbs, New Mexico 88240

II. DESCRIPTION OF WELL AND LEASE
Well Name: D. C. Hardy
Lease Name: Minebry (Gap)
Kind of Lease: State, Federal or Fee
Fee
Location: Section 20, Township 24S, Range 37E, NE 1/4, Section 20, Hobbs, Lea County, New Mexico

III. DESIGNATION OF TRANSPORT OF OIL AND NATURAL GAS
Name of Authorizer: Skelly Oil Company
Name of Transporter: Skelly Oil Company
If well produces oil or fluids, give location of tanks: E 20 21 37 Yes
If this production is commingled with that from any other lease or pool, give commingling order number: 2223 Dodge St. Omaha, Nebraska

IV. COMPLETION DATA
Designate Type of Completion: (X)
Date Spudded:
Elevations (D.F., RKB, RT, GR, etc.):
Perforations:

Table with 4 columns: HOLE SIZE, CASING & TUBING SIZE, DEPTH SET, SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL
Date First New Oil Run To Tanks:
Length of Test:
Actual Prod. During Test:
Producing Method:
Casing Pressure:
Choke Size:

GAS WELL
Actual Prod. Test-MCF/D:
Length of Test:
Producing Method (pilot, back pn.):
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.
Area:
Date:

OIL CONSERVATION COMMISSION
APPROVED:
BY:
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.