

DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-104	
SANTA FE		REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-1	
FILE		AND		Effective 1-1-65	
U.S.G.S.		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE		5 - NMOCD - Hobbs		1 - File	
TRANSPORTER		1 - CM - Foreman		1 - BW	
OIL		1 - DW - Engr		1 - WLG	
GAS				1 - BB	
OPERATOR					
PRODUCTION OFFICE					

Operator Getty Oil Company			
Address P.O. Box 730, Hobbs, New Mexico 88240			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of: ☐	Reclassified from ^{GAS} oil to ^{oil} gas well	
Recompletion ☐	Oil ☐ Dry Gas ☐	effective January 1, 1982	
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐		

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE			
Lease Name D.A. Williamson	Well No. 2	Pool Name, including Formation Tubb (Oil & Gas)	Kind of Lease State, Federal or Fee Fee
Location Unit Letter <u>E</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u>			
Line of Section <u>23</u> Township <u>21-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> County			

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)	
Texas New Mexico Pipeline Company		P.O. Box 1510, Midland, TX 79701	
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐		Address (Give address to which approved copy of this form is to be sent)	
Getty Oil Company		P.O. Box 1137, Eunice, NM 88231	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 23	Twp. 21
		Pge. 37	Is gas actually connected? Yes
			When 12/11/75

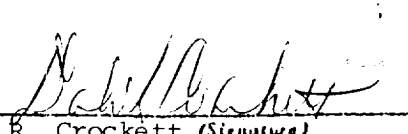
If this production is commingled with that from any other lease or pool, give commingling order number: PC-503

COMPLETION DATA			
Designate Type of Completion - (X)			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, CR, etc.)	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

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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	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 (flow, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

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.		APPROVED <u>DEC 11 1981</u> , 19	
 Dale R. Crockett (Signature) Area Superintendent		BY <u>Jerry E. Jones</u> TITLE <u>Asst. Dir.</u>	
November 20, 1981 (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 allowance on new and recompleted wells. Fill out only Portions I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	