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-11
Effective 1-1-65

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER OIL / GAS	
OPERATOR	
PRORATION OFFICE	

5-NMOCC-HOBBS ✓
1-R. J. STARRAK-TULSA
1-A. B. CARY-MIDLAND
1-PJB, ENGR.
1-BW, PROD CLK
1-BH, FIELD CLK
1-FILE
1-PHILLIPS, MIDLAND
1-SABINE, MIDLAND

Operator
Getty Oil Company

Address
P. O. Box 730, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

- New Well [X]
- Recompletion [ ]
- Change in Ownership [ ]
- Change in Transporter of: Oil [X] Dry Gas [ ] Casinghead Gas [ ] Condensate [ ]

Other (Please explain)
Dual

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Grama Ridge Wolfcamp R-6088 & R-6328

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Getty 36 State Com.	1	~~Undesignated~~ Wildcat	State XXXXXXXXX	LG-6004

Location
Unit Letter F : 1980 Feet From The North Line and 1650 Feet From The West

Line of Section 36 Township 21-S Range 34-E , NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation	P. O. Box 3119, Midland, Tex. 79702
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [X]	Address (Give address to which approved copy of this form is to be sent)
Llano, Inc.	P. O. Drawer 1320, Hobbs, NM 88240

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	36	21-S	34-E	Yes	8/21/79

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

COMPLETION DATA

Designate Type of Completion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X	X	X					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
2-21-79	7-2-79	13,350	13,029
Elevations (DF, RKB, RT, GR, etc.)	**Name of Producing Formation**	**Top Oil/Gas Pay**	**Tubing Depth**
3674' GL	Wolfcamp	11,320'	10,495'
Perforations			**Depth Casing Shoe**
11,320-11,335' = .38" = 16 holes			13,349

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
24	20	38	5 yds
17 1/2	13 3/8	1099	1200 sxs
12 1/4	9 5/8	5502	2940 sxs
8 1/2	7	11,114	1900 sxs
	4 1/2	13,349	255 sxs

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
7-21-79	8-27-79	Flowing	
Length of Test	**Tubing Pressure**	**Casing Pressure**	**Choke Size**
24 hrs.	3700#	Packer	13/64"
Actual Prod. During Test	**Oil-Bbls.**	**Water-Bbls.**	**Gas-MCF**
774	752	22	3,822

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**

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.

Dale R. Crockett: Dale R. Crockett
(Signature)

Area Superintendent
(Title)

August 20, 1979
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 31 1979, 19

BY

TITLE SUPERVISOR DISTRICT I

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, it 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 operator, well name or number, or transporter, or other such change of condition.