NO. OF COPIES RECEIVED				•
DISTRIBUTION	NEW MEXICO OIL, CONSERVATION COMMISS:			Form C-104
SANTA FE		REQUEST FOR ALLOWABLE AND REQUEST FOR ALLOWABLE Supersedes Old C-104 and C- Effective 1-1-65		
FILE				
U.S.G.S.	AUTHORIZ	ZATION TO TRA	NSPORT OIL AND NATU	IRAL GAS
LAND OFFICE	—-,			
TRANSPORTER GAS				
OPERATOR			•	
PRORATION OFFICE				
operator Gulf Coll Comporation				
^{Address} Box 670, Hobbs, H e w De	exico			
Reason(s) for filing (Check proper bo		menorter of	Other (Please explo	oase name and well maker
Recompletion	Change in Transporter of: Oil Dry Gas		effective 6-1-65	
Change in Ownership	Casinghead G	as Conder	nsate Was Gulf's	Lee Stebbins (NCT-B) #2
change of ownership give name nd address of previous owner	LEASE 🐞	ll is T/A		
Lease Name		Well No. Pool Na	me, Including Formation	Kind of Lease
Jouth Penrose Skelly (mic >	50 Larros	e Skelly - Graybur	State, Federal or Fee
_ocation	· -		.	
'Jnit Letter B ; 6	60 Feet From Th	he North Lin	e and 1980 Fe	et From The
Line of Section 5 , T				
	ownship 22_8	Range 37	, NMPM,	County County
ESIGNATION OF TRANSPO	RTER OF OIL AN		AS	
DESIGNATION OF TRANSPOL Name of Authorized Transporter of C Shell Pipeline Corpora	RTER OF OIL AN	D NATURAL GA	.S Address (Give address to whi	ch approved copy of this form is to be sent)
DESIGNATION OF TRANSPOL Name of Authorized Transporter of C Shell Pipeline Corpora Name of Authorized Transporter of C Larren Petroleus Corpo	RTER OF OIL AN or Conde	D NATURAL GA	Address (Give address to whi Box 1910, lidland Address (Give address to whi	ch approved copy of this form is to be sent) TEXAS ch approved copy of this form is to be sent)
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OIL CONSERVATION COMMISSION

Choke Size

Gravity of Condensate

AMPROVED	liar 27	19 6 <u>5</u>
JAP C	1 1 man	1_
Street	uni nom Di nturi at A	
TITLE SUPER	visor, District 1	

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.

(Title)

(Date)

Length of Test

Tubing Pressure

GAS WELL

Lay 33, 1965

Actual Prod. Test-MCF/D

resting Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

This form is to be filed in compliance with RULE 1104.

Bbls. Condensate/MMCF

Casing Pressure

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. Irea Production Panager

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 completed wells.