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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION 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-110  
Effective 1-1-65

Operator <b>Skelly Oil Company</b>		
Address <b>P. O. Box 1351, Midland, Texas 79701</b>		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:	<b>The Paddock Zone is Humble's Paddock (San Angelo) Unit No. 86. The well is now a dual with Skelly operating the Drinkard Zone.</b>
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE				
Lease Name <b>Baker "B"</b>	Well No. <b>5</b>	Pool Name, including Formation <b>Drinkard</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No. <b>---</b>
Location				
Unit Letter <b>N</b> ; <b>660</b> Feet From The <b>South</b> Line and <b>1980</b> Feet From The <b>West</b>				
Line of Section <b>10</b> Township <b>22S</b> Range <b>37E</b> , NMPM, <b>Lea</b> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
<b>Shell Pipe Line Corporation</b>		<b>P. O. Box 2648, Houston, Texas 77001</b>		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
<b>Skelly Oil Company</b>		<b>P. O. Box 1135, Eunice, New Mexico 88231</b>		
If well produces oil or liquids, give location of tanks.	Unit <b>0</b>	Sec. <b>10</b>	Twp. <b>22S</b>	Rge. <b>37E</b>
			Is gas actually connected? <b>Yes</b>	When <b>March 24, 1972</b>

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
<b>---</b>		<b>X</b>			<b>X</b>				<b>X</b>
Date Spudded <b>---</b>	Date Compl. Ready to Prod. <b>3-24-72</b>	Total Depth <b>7322.5'</b>		P.B.T.D. <b>6550'</b>					
Elevations (DF, RKB, RT, GR, etc.) <b>3417' DF</b>	Name of Producing Formation <b>Drinkard</b>	Top Oil/Gas Pay <b>5082'</b>		Tubing Depth <b>6350'</b>					
Perforations <b>6438-6536' Drinkard</b>				Depth Casing Shoe <b>6550'</b>					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
	<b>13-3/8"</b>	<b>44.5#</b>		<b>200</b>					
	<b>9-5/8"</b>	<b>36 &amp; 43.5#</b>		<b>1400</b>					
	<b>5-1/2"</b>	<b>17#</b>		<b>400</b>					

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>March 24, 1972</b>	Date of Test <b>May 17, 1972</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pumping</b>	
Length of Test <b>24 hours</b>	Tubing Pressure <b>---</b>	Casing Pressure <b>---</b>	Choke Size <b>---</b>
Actual Prod. During Test	Oil-Bbls. <b>1</b>	Water-Bbls. <b>3</b>	Gas-MCF <b>18</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.	
(Signed) <b>C. J. Love</b>	<b>C. J. Love</b>
(Signature)	
<b>District Production Manager</b>	
(Title)	
<b>May 24, 1972</b>	
(Date)	

OIL CONSERVATION COMMISSION	
APPROVED	<b>MAY 26 1972</b>
BY	<b>SUPERVISOR DISTRICT I</b>
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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MAY 22 1972

OIL CONSERVATION COMM.  
HOBBBS, N. H.