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O.N.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	
Operator	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

5-NMOCC-HOBBS
1-R. J. SEARRAK-TULSA
1-A. B. CARY-MIDLAND
1-PJB, ENGR.

1-BW, PROD CLK
1-BB, OFC TECH
1-BH, FIELD CLK
1-FILE

Form C-104
Supersedes Old C-101 and C-11
Effective 1-1-65

Getty Oil Company

Address
P. O. Box 730, Hobbs, New Mexico 88240

Reason(s) for filing (check proper box)

New Well	☐	Change in Transporter of:	
Recompletion	☒	Oil	☐
Change in Ownership	☐	Crude/Head Gas	☐
		Dry Gas	☐
		Condensate	☐

Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Baker B	14	Blinbry	XXXXXXXXXX Fee	

Location

Unit Letter M : 330 Feet From The South Line and 510 Feet From The West

Line of Section 10 Township 22-S Range 37-E . N.M.P.M. Lea 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)
Shell Pipeline Corp.	P. O. Box 2648, Houston, Texas 77002
Name of Authorized Transporter of Crude/Head 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	Sec.	Twp.	Range	Is gas actually connected?	When
	10	22-S	37-E		Yes	3-17-80

If this production is commingled with that from any other lease or pool, give commingling order number: PC-554

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Restr.	Full Restr.
	☒			☒				☒

Date xxxxx workover	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
1-16-80	3-15-80	7589'	5890'

Drivations (DF, RSD, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
3408' G.L.	Blinbry	5420'	5851'

Perforations	Depth Casing Shoe
5687-5790', 1 spf, 22 (.41") holes; 5420-5685', 1 spf, 54 (.50") holes	7545'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17	13 3/8	159	105
11 1/4	8 5/8	2800	800
7 3/8	5 1/2	7545	740

TEST DATA AND REQUEST FOR ALLOWABLE (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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
2-23-80	3-21-80	Pump	

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	-	-	-

Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gals-MCF
49	12	37	165

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Lbbs. Condensate/MCF	Gravity of Condensate

Testing Method (flow, shut-in, etc.)	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: [Signature]
(Signature)

Area Superintendent [Signature]
(Title)

3-26-80

OIL CONSERVATION COMMISSION

APPROVED MAR 31 1980

BY [Signature]

TITLE SUPERVISOR DISTRICT I

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

If this be a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviate 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 re-completed wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, of transporter, or other such change of conditions.