

57	YALF		
FILE			
G.S.			
OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRODUCTION OFFICE			

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

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

Operator Getty Oil Company	
Address P. O. Box 1351, Midland, Texas 79702	
Reason(s) for filing (check proper box)	Other (Please explain)
New Well ☐	Skelly Oil Company merged with Getty Oil Company effective 1-31-77
Recompletion ☐	
Change In Ownership ☒	
Change In Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	

If change of ownership give name and address of previous owner Skelly Oil Company, P. O. Box 1351, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name Skelly Penrose "A" Unit	Well No. Pool Name, including Formation 12 Langlie-Mattix	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter N : 660 Feet From The SOUTH Line and 1980 Feet From The WEST			
Line of Section 34 Township 22-S Range 37-E, NMPM, Lea County			

III. 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)
None - Input	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
None	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When

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

V. COMPLETION DATA

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

V. 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.)	
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 (pilot, 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) LELAND FRANZ

(Signature) Leland Franz

District Production Manager

(Title)

February 1, 1977

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 ____

BY _____

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 allowables 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.

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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-105
Effective 1-1-65

State Type of Lease	See ☒
Other	

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.

1. Well Type ☐ OIL ☐ GAS ☐ WELL ☐ OTHER- Water Injection Well	7. Unit Agreement (See Skelly Penrose "A" Unit)
2. Name of Operator Skelly Oil Company	8. Name of Lease (Name Skelly Penrose "A" Unit)
3. Address of Operator P. O. Box 1351, Midland, Texas 79701	9. Well No. 12
4. Location of Well UNIT LETTER N 660 FEET FROM THE South LINE AND 1980 FEET FROM West LINE, SECTION 34 TOWNSHIP 22S RANGE 37E	10. Field No. (See, or Wildcat Langlie-Mattix)
15. Elevation (Show whether DF, RT, GR, etc.) 3318' DF	Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐ PULL OR ALTER CASING ☐ OTHER ☐	REMEDIAL WORK ☐ COMMENCE DRILLING OPER. ☐ CASING TEST AND CEMENT OF ☐ OTHER ☒ Casing Connections

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent measurements, etc. for proposed work) SEE RULE 1103.

**Riser on 16" and 7" OD casing brought to surface.
Inspected by L. A. Clements January 7, 1975.**

18. I hereby certify that the information above is true and complete to the best of my knowledge.

(Signed) **D. R. Crow** **D. R. Crow** TITLE **Lead Clerk** 1-30-75

SIGNED _____ TITLE _____

APPROVED BY **John D. Crow** TITLE _____

CONDITIONS OF APPROVAL, IF ANY: