STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

-0. 07 (07:10 011	****		
DISTRIBUTIO	OH		
BANTA PE			
FILE			
U.S.G.S.			
LAND OFFICE		1	
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE

AND
ALITHOPIZATION TO TRANSPORT OIL AND NATURAL O

PROBATION OFFICE AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS		
Coperator			
J G 20 Properties, Inc.			
Address			
c/o Oil Reports & Gas Services, Inc., Box 755			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	755		
	Effective 9-1-87		
X Change in Ownership Casinghead Gas Ca	NOTION OF THE PROPERTY OF THE		
If change of ownership give name D.M. Norman, P. O. Box and address of previous owner	1585, Midland, Texas 79702		
and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Fo	ormation Kind of Lease Lease	- No	
	See Sederal or See	• 110.	
McCallister 1 Tubb	State, Federal of Fee		
F 1980 - North	660 Feet From The West		
Unit Letter : 1900 Feet From The NOTER Lin	and ood restriction the wood		
Line of Section 7 Township 22S Range	38E , NMPM, Lea Co	ounty	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS Address (Give address to which approved copy of this form is to be sent,		
Name of Authorized Transporter of CII XX or Condensate	l'		
Permian Name of Authorized Transporter of Casinghead Gas T or Dry Gas	P. O. Box 1183, Houston, Texas 77251-1183 Address (Give address is which approved copy of this form is to be sent,	, 	
	1		
Texaco Producing, Inc. Unit Sec. Twp. Rge.	P. O. Box 3000, Tulsa, Oklahoma 74102		
If well produces oil or liquids, give location of tanks. E 7 205 38E	Yes 10-31-66		
If this production is commingled with that from any other lease or pool,	give commingling order number:		
NOTE: Complete Parts IV and V on reverse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
	SEP 8 1987 19		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of	APPROVED JLI U IJUI , 19		
my knowledge and belief.			
	TITLE Oil & Gas Inspector		
,	•		
This form is to be filed in compliance w			
(Signature)	If this is a request for allowable for a newly drilled or dee well, this form must be accompanied by a tabulation of the devices taken on the well in accordance with RULE 111.	intio	
Agent	All sections of this form must be filled out completely for	allow	
(Title) 9-4-87	able on new and recompleted wells.		
(Date)	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.

NO. OF COPIES RECE	EIVED		
DISTRIBUTIO	NC		
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OF	FICE	i i	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C -104

SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
FILE U.S.G.S.	AUTHODIZATION TO TRAI	AND NSPORT OIL AND NATURAL	GAS
LAND OFFICE	AUTHORIZATION TO TRAI	ASLOW! OIL WAD MY LOVYE	
IRANSPORTER OIL			
GAS			
OPERATOR			
PRORATION OFFICE Operator			-
D. M.	Norman		
Address			
310 Central Bldg,	Midland, Texas 79701		
Reason(s) for filing (Check proper box		Other (Please explain)	
New Well	Change in Transporter of: Oil Dry Gas		
Recompletion	Oil Dry Gas Casinghead Gas Conden		
Change in Ownership	Gashiqueda Gas		
If change of ownership give name and address of previous owner	Burleson & Huff		
and address of previous owner			
I. DESCRIPTION OF WELL AND	LEASE Lease No. Well No. Pool Nar	ne, Including Formation	Kind of Lease
Lease Name			State, Federal or Fee
McCallister Location	11757 1 Tub	3	
TP 104	North Feet From The Lin	e and <u>660 </u>	om The West
Unit Letter;;	rectrion in		
Line of Section 7 To	wnship 22S Range	38E , NMPM, Le	& County
· 			
I. DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GA	Address (Give address to which ap	proved copy of this form is to be sent)
The Fermian Corp.	Parmico (Eli. 9 / 1 /87)	P.O. Box 3119. M	idland. Teras 79701
Name of Authorized Transporter of Ca	singhead Gas 🚺 or Dry Gas 🗍	Address (Give address to which ap	idland Texas 79701 proved copy of this form is to be sent)
Skelly Oil	Co.	Tulsa, Okla. 741	
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When November 1966
give location of tanks.	E 7 228 38E	Yes	
	th that from any other lease or pool,	give commingling order number:	EFFECTIVE JANUARY 31, 1977,
V. COMPLETION DATA	Oil Well Gas Well		SKELLY OIL COMPANY MERCE INTO GETTY OIL COMPANY.
Designate Type of Completi	on = (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
			Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe
Perforations			
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
DECLIES A	TOP ALLOWARIE (Test must be	ofter recovery of total volume of load	loil and must be equal to or exceed top allow
V. TEST DATA AND REQUEST I	able for this d	epth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, g	as lift, etc.)
			Choke Size
Length of Test	Tubing Pressure	Casing Pressure	0,1020 0120
Date Tool	Oil-Bbis.	Water-Bbls.	Gas-MCF
Actual Prod. During Test			
		<u> </u>	
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
		Casing Pressure	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure	Cdsing Plessure	
		OU CONSE	RVATION COMMISSION
VI. CERTIFICATE OF COMPLIA	NCE	OIL CONSE	, v .
and the state of t	i regulations of the Oil Conservation	APPROVED	, 19
d base complied	with and that the information gives		The
above is true and complete to t	he best of my knowledge and belief.	BY THE	
		TYTY =	
		This form is to be filed	i in compliance with RULE 1104.
			- 11 to for a namely drilled or deepen
S. S	eest.	If this is a request for	ampanied by a tabulation of the deviati
V. 300.	gnature)	well, this form must be acc	ompanied by a tabulation of the deviation accordance with RULE 111.
0 po - 110	gnature)	well, this form must be acc tests taken on the well in	ompanied by a tablilation of the deviation accordance with RULE 111. m must be filled out completely for allo
0 po - 10 (Si	gnature) Title)	well, this form must be acc tests taken on the well in All sections of this for able on new and recomplete	ompanied by a tabulation of the deviation accordance with RULE 111. m must be filled out completely for allowed wells. The transport William on the changes of owner.
11 6000 6	gnature) Title) Date)	well, this form must be acc tests taken on the well in All sections of this for able on new and recomplete Fill out only Sections	ompanied by a tabliation of the deviation accordance with RULE 111. m must be filled out completely for allowed wells. I, II, III, and VI for changes of owners according to the supporter, or other such change of conditions.
11 640 6	· 3	well, this form must be acc tests taken on the well in All sections of this for able on new and recomplete Fill out only Sections	ompanied by a tabulation of the deviation of the deviatio