w. or corins starting       Distribution       New MEXICO OLI CONSERVATION CON       A       Function         SANTA FE       REQUEST FOR ALLOWABLE       AND       AND       Diffective 1-         U.S.G.S.       AUTHORIZATION TO TRANSPORT OLI AND NATURAL GAS       Diffective 1-       Diffective 1-         U.S.G.S.       AUTHORIZATION TO TRANSPORT OLI AND NATURAL GAS       Diffective 1-       Diffective 1-         U.S.G.S.       AUTHORIZATION TO TRANSPORT OLI AND NATURAL GAS       Diffective 1-       Diffective 1-         U.S.G.S.       Image 10 and 1	Did C-104 and C-1 -65	
SANTAFE       NEW MEXICO OL CONSERVATION COL A Supervised of the specific of the speci	Old C-104 and C-1 -65	
FILE       AND	Nd C-104 and C-1 -65	
U.S.G.S.       AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS         LAND OFFICE       OIL         IRANSPORTER       OIL         OPERATOR       DESCRIPTION OFFICE         Creation       DRAWER 728         Address       HOBBS, NEW MEXICO 88240         Restants) for filing (Check proper box)       Change in Transporter of:         New Well       Change in Transporter of:         Change of ownership give name       Other (Please septein)         Change of ownership give name       Casinghead Gas         address of previous owner       Gas         Address of previous owner       Battery 3         Unit Letter D       660         Feet From The	· · · · · · · · · · · · · · · · · · ·	
LAND OFFICE       OIL         ITRANSPORTER       OIL         OPERATOR       GAS         OPERATOR       DRAWER         PRORATION OF FICE       DRAWER         Contraction       DRAWER         Address       HOBBS, NEW MEXICO 88240         Reason(s) for filing (Check proper box)       Dher (Please explain)         New Will       Change in Transporter of:         Recompletion       Oil         Change in Ownership       Casinghead Gas         Description       Other (Please explain)         Change in Ownership       Casinghead Gas         Description       Other (Please explain)         Change in Ownership       Casinghead Gas         Description       Casinghead Gas         Condensate       Condensate         Description       Battery 3         Until Letter       GO         Coention       Battery 3         Until Letter       GO         Description       Fastery 3         Until Letter       GO         Section       Reference of Section 28         Township       22-S         Range 38-E       IMMEM         Line of Section       Condensate         P. O. Box 1135		
TRANSPORTER       GAS         OPERATOR       PRORATION OFFICE         Creater       DRAWER 728         Address       HOBBS, NEW MEXICO 88240         Resson(s) for filing (Chrick proper box)       Other (Please explain)         New Well       Change in Transporter of:         OUL       Dry Gas         Change in Ownership       Casinghead Gaé         Change of ownership       Casinghead Gaé         I Change of ownership give name       Gas         and address of previous owner       Casinghead Gaé         DESCRIPTION OF WELL AND LEASE       I well No. Pool Name, Including Formation         Leeten       Battery 3         Unit Letter       D         Battery 3       Tubb         Unit Letter       G60         Feet From The       North         Line of Section 28       Township 22-S         Range       38-E         P. O. Box 1510       Change of Condeneste         P. O. Box 1510       Change of Condenester of Condenester         P. O. Box 1510       Change of Condenester of Condenestere of Condenester of Condenester of Condenester of Cond		
PRORATION OFFICE       TEXAGO, INC.         Coperator       DRAWER 728         Address       HOBBS, NEW MEXICO 88240         Reason(s) for filing (Check proper box).       Other (Please explain)         New Weil       Change in Transporter of: Ottage in Ownership       Other (Please explain)         Change in Ownership give name and address of previous owner       Other (Please explain)       Change in . lease name.         DESCRIPTION OF WELL AND LEASE       Veil No. Pool Name, Including Formation       Kind of Lease         Leare Name       address of previous owner       Battery 3       Tubb         Unit Letter       Battery 3       Tubb       State, Federal or Fe         Location       Battery 3       Mame, Including Formation       North         Line of Section 28       Township 22-S       Runge 38-E       MERCITY 31, 1977,         Name of Autorized Transporter of Oil X       or Condensate       Address to watch approved copy of Min form in Texas-New Mexico Pipe Liné Company       P. O. Box 1105 - Eunice, New Mexico Pipe Correl of State form and the state approved copy of Min form in Skell y Oil Company         Name of Autorized Transporter of Casingheed Gas S2       or Dry Gas       Address to watch approved copy of Min form in P. O. Box 1105 - Eunice, New Mexico Pipe Liné Company         New I vertions accountingled with that from any other lease or pool, give commingling order number:       PC-		
Cperator       IEAMUJ, INU.         Address       DRAWER 728         Address       HOBBS, NEW MEXICO 88240         Ressen(s) for filing (Chrck proper box).       Change in Transporter of:         New Well       Other (Please explain)         Recompletion       Oil         Change in Transporter of:       Change in Transporter of:         Change of ownership       Casinghead Gaé         Condensate       Change of ownership give name         and address of previous owner       Condensate         DESCRIPTION OF WELL AND LEASE       Vell No.         Lease Name       Battery 3         Unit Letter       Ed60         Feet From The       West         Line of Section 28       Township 22-S         Range 38-E       NMPM.         Res of Authorized Transporter of Oil AND NATURAL GAS       SKELLY OIL COMPANY MERCED OIL AND NATURAL GAS         SKelly Oil Company       P. O. Box 1510       Middress fibre address to which approved copy of this form in Texas-New Mexico Pipe Liné Company         If weil produces of or liquids, form in the spotter of Casinghead Gae Rg or Dry Gae       Address fibre address to which approved copy of this form in Skell IV 011         Skell V011 Company       P. O. Box 1510       P. O. New Mexico         If weil produces off or liquids, fibre address of or liquids,		
DRAWER 728         HOBBS, NEW MEXICO 88240         Reason(s) for filing (Check proper box).       Other (Please explain)         New Writt       Change in Transforter of:       Dry Gas       Change In . lease name.         Change in Ownership       Casinghead Gaé       Dry Gas       Change In . lease name.         Change in Ownership       Casinghead Gaé       Dry Gas       Change In . lease name.         DESCRIPTION OF WELL AND LEASE       Condensate       Vell No. Pool Name, Including Formation       Kind of Lease         Lease Name       A.H. Bilinebry NCL+ Federal / 1       33       Tubb       State, Federal or Fe         Location       Battery 3       Unit Letter D		
Address       HOBBS, NEW MEXICO 88240         Reason(s) for filing (Check proper box)       Change in Transporter of:       Other (Please explain)         New Well       I       Change in Transporter of:       Other (Please explain)         Recompletion       Oil       Dry Gas       Condensate         Change in Ownership give name and address of previous owner       Cestinghead Gas       Condensate       Change in . iéase name.         DESCRIPTION OF WELL AND LEASE       Lease Name       Kind of Lease       State, Federal or Fe         Lease Name       Battery 3       Tubb       State, Federal or Fe         Unit Letter       0       660       Feet From The       North         Line of Section       28       Township       22-S       Range       38-E       IMPM,       Leas         DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       SKELLY OIL COMPANY MERGEN       SKELLY OIL COMPANY MERGEN       Form if       form if         Name of Authorized Transporter of Oil [x]       or Condensate       Address for which approved copy of this form if         Name of Authorized Transporter of Oil [x]       or Condensate       Address for which approved copy of this form if         Name of Authorized Transporter of Oil [x]       Or Condensate       P. O. Box 1135       Funlo 3, NeW Mexico         Name of Auth		
Reason(s) for filing (Check proper box)       Change in Transporter of:       Other (Please explain)         New Weil       Condensate       Condensate       Change in . iéase name.         Change in Ownership       Casinghead Gai       Condensate       Change in . iéase name.         Change in Ownership give name and address of previous owner       Condensate       Condensate       Change in . iéase name.         DESCRIPTION OF WELL AND LEASE       Lease Name       Well No.       Pool Name, Including Formation       Kind of Lease         Lease Name       Battery 3       Unit Letter D       : 660       Feet From The : West       Line and 660       Feet From The North         Line of Section 28       Township 22-S       Range 38-E       NMPM.       Lease         DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       SKELLY OIL COMPANY MERCHING form it         Name of Authorized Transporter of Clasinghead Gas K2 or Dry Gas       Address fGive address to which approved copy of this form it         Name of Authorized Transporter of Casinghead Gas K2 or Dry Gas       Address fGive address to which approved copy of this form it         Name of Authorized Transporter of Casinghead Gas K2       Or Dry Gas       Address fGive address to which approved copy of this form it         Name of Authorized Transporter of Casinghead Gas K2       Or Dry Gas       Address fGive address to which approved copy of this form it <td></td>		
New Well       Change in Transporter of:       Oil       Dry Gas       Change in liease name.         Change in Ownership       Casinghead Gas       Condensate       Change in liease name.         If change of ownership give name and address of previous owner       Casinghead Gas       Condensate       Change in liease name.         DESCRIPTION OF WELL AND LEASE       Well No.       Pool Name, Including Formation       Kind of Lease         Lease Name       Battery 3       Tubb       State, Federal or Fe         Location       Battery 3       Unit Letter       O       660       Feet From The       North         Line of Section       Z8       Township       Z2-S       Range       38-E       NMPM,       Leas         Designation of Transporter of Oil (X)       or Condensate       Address (Give address to which approved copy of this form if         Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas       Address (Give address to which approved copy of this form if         Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas       Address (Give address to which approved copy of this form if         Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas       Address (Give address to which approved copy of this form if         Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas       Yes       December 29, 1         It		
Change in Ownership       Casinghead Gas       Condensate       Change in Yurusus in		
If change of ownership give name and address of previous owner		
and address of previous owner		
DESCRIPTION OF WELL AND LEASE         Lease Nome       Well No.       Pool Name, Including Formation       Kind of Lease         A. H. Blinebry NCT-+       Federal / / 33       Tubb       State, Federal or Fe         Location       Battery 3       Unit Letter D       660       Feet From The       North         Line of Section       28       Township       22-S       Range       38-E       NMPM,       Lease         DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       SKELLY OIL COMPANY MERCIPS       Image: Company       P. O. Box 1510 - MIORANY MERCIPS form if form if         Name of Authorized Transporter of OIL (Company)       Or Condensate D       Address (Give address to which approved copy of this form if         Skelly OII Company       P. O. Box 1510 - MIORANY, MERCIPS (Image: Company)       P. O. Box 1513 - Eunice, New Mexico         Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas D       Address (Give address to which approved copy of this form if         Skelly OII Company       P. O. Box 1513 - Eunice, New Mexico       P. O. Box 1513 - Eunice, New Mexico         If well produces oil or liquids, give location of tanks.       E 33       22-S       38-E       Yes         Designate Type of Completion - (X)       OII Well       Gas Well       Netwer Deepen       Plug Back       Same R         Pool       Date		
Lease Name       Well No.       Pool Name, Including Formation       Kind of Lease         A. H. Blinebry NCT-+ Federal /       33       Tubb       State, Federal or Fe         Location       Battery 3       Tubb       State, Federal or Fe         Unit Letter D       660       Feet From The       West +       Line and       660       Feet Prom The       North         Line of Section       28       Township       22-S       Range       38-E       , NMPM,       Lease         BESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       SKELLY OIL COMPANY METCED       Address Krino action of words of points form is         Texas-New Mexico Pipe Line Company       P. O. Box 1510       - Mid State, Federal or form is         Name of Authorized Transporter of Casinghead Gas X2 or Dry Gas       Address fore active of words paroved copy of this form is         Skelly Oil Company       P. O. Box 1135       - Eunice, New Mexico         If well produces oil or liquids, dive to cation of tanks.       E       33       22-S       38-E       Yes       Oecember 29, 1         If this production is commingled with that from any other lease or pool, give commingling order number:       PC-21       PC-21         Completion - (X)       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same R	·	
A. H. Blinebry NCT-+ Federal       33       Tubb       State, Federal or Fe         Location       Battery 3       State, Federal or Fe       State, Federal or Fe         Unit Letter       D       : 660       Feet From The       West       Line and       660       Feet From The       North         Line of Section       28       . Township       22-S       Range       38-E       . IMPM,       Lega         DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       SKELLY OIL COMPANY MERCED       Address Thir address for address of participation of the form in Texas-New Mexico Pipe Line Company       P. 0. Box 1510 - Midfand, Fexas         Name of Authorized Transporter of Calinghead Gas K2 or Dry Gas       Address for address to which approved copy of this form in Skelly Oil Company       P. 0. Box 1135 - Eurice, New Mexico         Name of Authorized Transporter of Casinghead Gas K2 or Dry Gas       Sec.       Twp.       Rge.       Is gas actually connected?       When         If well produces oil or liquids, dive location of tanks.       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When         Designate Type of Completion - (X)       Oil Well       Gas Well       New Well       Workover       December 29, 1         Date Spudded       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.       P.O. Dil/Gas Pay </td <td></td>		
Location       Battery 3         Unit Letter       D       660       Feet From The       North         Line of Section       28       Township       22-S       Range       38-E       NMPM,       Lea         BESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Oil X       or Condensate       Address Kerry active a paper of the form in the fo		
Unit Letter       D       660       Feet From The       West       Line and       660       Feet From The       North         Line of Section       28       Township       22-S       Range       38-E       , NMPM,       Lea         DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         SKELLY OIL COMPANY AT RGED         Name of Authorized Transporter of OII       x)       or Condensate       Address for detert to which approved copy of this form is         Texas-New Mexico Pipe Line       Company       P. O. Box 1510 - Midtall, Texas       Name of Authorized Transporter of Casinghead Gas K2       or Dry Gas         Name of Authorized Transporter of Casinghead Gas K2       or Dry Gas       Address (Give address to which approved copy of this form is         Skelly Oil Company       P. O. Box 1135 - Eunice, New Mexico         If well produces oil or liquids, give location of tanks.       E       33       22-S       38-E       Yes       December 29, 1         If this production is commingled with that from any other lease or pool, give commingling order number:       PC-21       Complexity or PC-21         COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Deepen       Pill Back       Same R         Date Spudded       Date Compil. Ready to Prod.       Total Depth       <	3 	
Line of Section       28       Township       22-S       Range       38-E       NMPM,       Lea <b>BESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS SKELLY OIL COMPANY MERCIPE JANUARY 31, 1977, Mame of Authorized Transporter of OIL XID NATURAL GAS SKELLY OIL COMPANY MERCIPA Address Mercipa Address Mercipa Name of Authorized Transporter of Casinghead Gas KX or Dry Gas</b> Address (Give address to which approved copy of this form in Pe 0. Box 1510 - Midfleth (Pexas)         Name of Authorized Transporter of Casinghead Gas KX or Dry Gas         Address (Give address to which approved copy of this form in Pexas)         Skelly 011 Company         Name of Authorized Transporter of Casinghead Gas KX or Dry Gas         Address (Give address to which approved copy of this form in Pexas)         Skelly 011 Company         If well produces oil or liquids, (Unit Sec.         Twp.       Rge.         Is gas actually connected?         When         Pole         Descenter of Completion - (X)         Oil Well       Gas Well <td colsp<="" td=""><td>· · ·</td></td>	<td>· · ·</td>	· · ·
BFRECTIVE JANUARY 31, 1977,         DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Oil [X]       or Condensate C         Name of Authorized Transporter of Oil [X]       or Condensate C       Address Trip of Difference which approved copy of this form is form in the sec.         Texas-New Mexico Pipe Line Company       P. O. Box 1510 - Mildrand, Yexas         Name of Authorized Transporter of Casinghead Gas XX       or Dry Gas C       Address (Give address to which approved copy of this form is form is form is form in the sec of transporter of transporter of Casinghead Gas XX       or Dry Gas C         Name of Authorized Transporter of Casinghead Gas XX       or Dry Gas C       Address (Give address to which approved copy of this form is form is form is form in the sec of transporter of transporter of Casinghead Gas XX         Name of I values, all y Oil Company       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When the form of the sec of the		
District of OUT TRANSPORTER, OF OUL AND NATURAL GAS       Skelly OIL COMPANY       NETROPHY OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of OII [X]       or Condensate       Address form a depersonation of proved copy of this form in the sector of the sec	County	
Texas=New Mexico Pipe Line Company       P. 0. Box 1510 - MidTand, Yexas         Name of Authorized Transporter of Casinghead Gas X       or Dry Gas       Address (Give address to which approved copy of this form in P. 0. Box 1135 - Eunice, New Mexico         Skelly Oil Company       P. 0. Box 1135 - Eunice, New Mexico       P. 0. Box 1135 - Eunice, New Mexico         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:       PC-21         COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Desepen       Plug Back       Same R         Designate Type of Completion - (X)       Oil Well       Gas Well       New Well       Workover       Desepen       Plug Back       Same R         Pool       Name of Producing Formation       Top Oil/Gas Pay       Tubing Depth       Depth Casing Shoe         Perforations       TUBING, CASING, AND CEMENTING RECORD       Depth Casing Shoe       Depth Casing Shoe		
Name of Authorized Transporter of Casinghead Gas XX       or Dry Gas       Address (Give address to which approved copy of this form in P. O. Box 1135 - Eunice, New Mexico         Skelly Oil Company       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When         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:       PC-21         COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same R         Designate Type of Completion - (X)       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same R         Pool       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.       P.B.T.D.         Perforations       Tubing Depth       Depth Casing Shoe         TUBING, CASING, AND CEMENTING RECORD       Depth Casing Shoe	to be sent)	
Skelly Oil Company       P. O. Box 1135 - Eunice, New Mexico         If well produces oil or liquids, give location of tanks.       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When         give location of tanks.       E       33       22-S       38-E       Yes       December 29, 1         If this production is commingled with that from any other lease or pool, give commingling order number:       PC-21         COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same R         Designate Type of Completion - (X)       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same R         Pool       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.       P.B.T.D.         Perforations       UBING, CASING, AND CEMENTING RECORD       Depth Casing Shoe		
If well produces on of liquids,       E       33       22-S       38-E       Yes       December 29, 1         If this production is commingled with that from any other lease or pool, give commingling order number:       PC-21         COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same R         Designate Type of Completion - (X)       Oil Well       Gas Well       New Well       Workover       Peepen       Plug Back       Same R         Date Spudded       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.         Pool       Name of Producing Formation       Top Oil/Gas Pay       Tubing Depth         Perforations       UBING, CASING, AND CEMENTING RECORD       Depth Casing Shoe	to be sent)	
If this production is commingled with that from any other lease or pool, give commingling order number:       PC-21         COMPLETION DATA       Oil Well       Gas Well       New Well       Workover       Desepen       Plug Back       Same R         Designate Type of Completion - (X)       Oil Well       Gas Well       New Well       Workover       Desepen       Plug Back       Same R         Date Spudded       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.         Pool       Name of Producing Formation       Top Oil/Gas Pay       Tubing Depth         Perforations       UDITS CASING, AND CEMENTING RECORD       Depth Casing Shoe		
COMPLETION DATA         Designate Type of Completion - (X)         Oil Well       Gas Well       New Well       Workover       Deepen       Plug Back       Same R         Date Spudded       Date Compl. Ready to Prod.       Total Depth       P.B.T.D.         Pool       Name of Producing Formation       Top Oil/Gas Pay       Tubing Depth         Perforations       UDI 5 6125       Depth Casing Shoe	965 ·	
Perforations  TUBING, CASING, AND CEMENTING RECORD		
TUBING, CASING, AND CEMENTING RECORD	-	
HOLE SIZE CASING & TUBING SIZE DEPTH SET ' SACKS CE		
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TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or	exceed top allow	
Date First New Oil Run To Tanks     Date of Test     Producing Method (Flow, pump, gas lift, etc.)	i	
	•	
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		
resting Method (pitot, back pr.) Tubing Pressure Casing Pressure Choke Size		
CERTIFICATE OF COMPLIANCE		
hereby certify that the rules and regulations of the Oil Conservation		
Commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		
TITLE		
This form is to be filed in compliance with RUL		
If this is a request for allowable for a newly dril well, this form must be accompanied by a tabulation	N 19 7 E 1104,	
IST. ACCOUNTANT tests taken on the well in accordance with RULE 11	N 19 E 1104, ed or deepened	
SEP 1 1967 (Title) All sections of this form must be filled out compl able on new and recompleted wells.	N 19 E 1104, ed or deepened of the deviation 1	
(Date) Fill out Sections I, II, III, and VI only for chan (Date)	N 19 E 1104, ed or deepened of. the deviation 1	
Separate Forms C-104 must be filed for each p	N 19 E 1104, ed or deepened of the deviation 1 etely for allow- nges of owner,	

completed wells.