

DISTRIBUTION	
SA	TA FE
FILE	
G.S.	
LD OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

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

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
5-NMOCC
1-W. L. Boone - Houston
1 - R. L. White - Midland
1 - File

I. Operator
GETTY OIL COMPANY
Address
P.O. BOX 249, HOBBS, NEW MEXICO 88240
Reason(s) for filing (Check proper box)
New Well ☒ XX
Recompletion ☐
Change in Ownership ☐
Change in Transporter of:
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name A.L. CHRISTMAS	Well No. 2	Pool Name, Including Formation JALMAT	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter D 760 Feet From The NORTH Line and 660 Feet From The WEST Line of Section 26 Township 22-S Range 36-E, NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> none	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> XX EL PASO NATURAL GAS COMPANY	Address (Give address to which approved copy of this form is to be sent) BOX 1384, JAL, N.M. 88252	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? When YES 1-29-75	

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

IV. COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX	XX					
Date Spudded 12-10-74	Date Compl. Ready to Prod. 12-27-74	Total Depth 3600	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3489 GR	Name of Producing Formation YATES 7-RIVERS	Top Oil/Gas Pay 3352'	Tubing Depth 3292'					
Perforations 3352-57'; 3373-89'; 3396-3404'			Depth Casing Shoe 3599'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
9-7/8	7-5/8	358	200					
6-3/4	4-1/2	3599	950					
	2-3/8	3292						

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 12-28-74	Producing Method (Flow, pump, gas lift, etc.) FLOW	
Length of Test 24	Tubing Pressure 60	Casing Pressure	Choke Size 3/4
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF 766

GAS WELL

Actual Prod. Test-MCF/D 766	Length of Test 24	Bbls. Condensate/MMCF none	Gravity of Condensate
Testing Method (pitot, back pr.) GAS METER	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size 3/4"

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.

C.L. Wade: C.L. Wade
(Signature)

REA SUPERINTENDENT
(Title)

NUARY 29, 1975
(Date)

OIL CONSERVATION COMMISSION

APPROVED FER 19
BY [Signature]
TITLE SUPERVISOR DISTRICT I

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.

RECEIVED

JAN 23 1975

OIL CONSERVATION COMM.
HOBBBS, N. M.