	ANTA FE		CONSTRUCTION COMMISSION FOR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C Effective 1-1-65
	S.G.S. AND OFFICE IRANSPORTER OIL GAS OPERATOR PRORATION OFFICE	AUTHORIZATION TO TR	ANSPORT OIL AND NATURA	AL GAS
1.	Skelly Oil Company	idland, Texas 79701 Change in Transporter of: Oil Dry G Casinghead Gas Conde	ensate Effective date	Formerly: Flag-Redfern Lynn "B" 25 Well No.2 of unitization 2-1-74
11.	DESCRIPTION OF WELL AND Lease Name Myers Langlie-Mattix Ur Location	nit 33 Mattix Seven	Formation Langlie Rivers Queen Kind of L	ease Lease No. deral or Fee Federal LC 030139
		Feet From The South Li winship 23S Range	ne and 1980 Feet Fr	com The East County
	Name of Authorized Transporter of Oil exas-New Mexico Pipeline Name of Authorized Transporter of Cas El Paso Natural Gas Com If well produces oil or liquids, qive location of tanks. If this production is commingled with COMPLETION DATA	e Company singhead Gas X or Dry Gas pany pany Unit Sec. Twr. Age. N 25 238 36E	P. O. Box 1510, Mid. Address (Give address to which a) P. O. Box 1492, E1 1 Is gas actually connected? Yes	oproved copy of this form is to be sent)
	Designate Type of Completic	Oil Well Gas Well on - (X)	New Well Workover Deepen Total Depth	Plug Back Same Res'v. Diff. Res'v
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oti/Gas Pay	Tubing Depth
	Perforations TURNING CASING AND CENT			Depth Casing Shoe
	HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT
v.	TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Cil 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	Cn - Bb;s.	Water - Bbis.	Gas-MCF
	GAS WELL			
	Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)	Length of Test Tubing Pressure (Shut-in)	Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Gravity of Condensate Choke Size
VI.	I. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	I hereby certify that the rules and r Commission have been complied w			, 19

(Signature) Leland Franz

(Title)

(Date)

District Production Manager

January 29, 1974

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 mections 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. Separate Forms C-104 must be filed for each pool in multiply