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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-11
Effective 1-1-655 - NMOCD - Hobbs
1 - File
1 - MidlandOperator
GETTY OIL COMPANYAddress
P.O. Box 730, Hobbs, NM 88240

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change In Transporter of:
Recompletion ☐	Oil ☐ Dry Gas ☐
Change In Ownership ☒	Coalinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner
Getty Reserve Oil, Inc., 312 HBF Bldg., Midland, TX 79701
This change effective 8/1/80

DESCRIPTION OF WELL AND LEASE					
Lease Name Cooper Jal Unit	Well No. 113	Pool Name, including Formation Langlie Mattix	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter N	330	Feet From The South	2310	Feet From The West	
Line of Section 13	Township 24-S	Range 36-E	NMPM,	Lea	County

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)		
Shell Pipe Line Company			Box 2648, Houston, TX 77001		
Name of Authorized Transporter of Coalinghead Gas ☒ or Dry Gas ☐			Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company			Box 1492, El Paso, TX 79978		
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 24	Twp. 24-S	Range 36-E	Is gas actually connected? When Yes 1955
If this production is commingled with that from any other lease or pool, give commingling order number:					R-663

COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Elevations (DF, RKB, RT, GR, 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

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lead 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/MCF		Gravity of Condensate
Testing Method (flow, back pr.)		Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED _____, 19____	
_____ (Signature)		BY _____	
AREA SUPERINTENDENT (Title)		TITLE _____	
September 18, 1980		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 portions 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 change of owner	