-	ANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65	
ŀ	ILE	A+ ORIZATION TO FRAN	ISPORT OIL AND N. JURAL G	AS	
,	AND OFFICE	AS IORIZATION TO TRAIN	(0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0	•	
t	OIL	$\mathcal{Y}$			
	GAS GAS	•			
ŀ	OPERATOR				
	RORATION OFFICE				
•	Operator	•			
	Skelly Oil Company				
	ddress D. O. Brand 1251 Midland Texas 79701				
	P. O. Box 1351, Midland, Texas 79701  eason(s) for filing (Check proper box)  Other (Please explain)				
	ew We!! Change in Transporter of: Formerly Atlantic Richfield's				
	ecompletion X Cal Dry Gas J. A. Cooper WN No. 2				
	Change in Ownership	Casinghead Gas Condensate			
	If change of ownership give name A	hange of ownership give name Atlantic Richfield Company, P. O. Box 1610, Midland, Texas 79701			
Skelly Oil Company purchased rights to Langlie-Mattix zone				Mattix zone only.	
II.	DESCRIPTION OF WELL AND L	EASE	rmation Kind of Leas	e Lease No.	
	Lease Name	Well No. Pool Name, increasing to	l	-	
	Myers Langlie-Mattix Uni	t 207 Langlie-Matti	IX Start		
	Location	North	1980	West	
Unit Letter F 1980 Feet From The NOTE Line and Too Feet From The Lea				The	
				ea County	
	Line of Section 12 Town	nsntp 270 Henge			
***	DESIGNATION OF TRANSPORT				
111.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent)				
	Shell Pine Line Company		P. O. Box 2628, Houston, Texas 77001		
	Name of Authorized Transporter of Casinghead Gas X or Dry Gas		Address (Give address to which approved copy of this form is to be sent)		
	El Paso Natural Gas Comp	pany	P. O. Box 1492, El Paso, Texas 79999		
	If well produces oil or liquids, Unit Sec. Twy. Rge.		Is gas actually connected? When		
	give location of tanks.	F 12 24 36	Yes	•	
	If this production is commingled with that from any other lease or pool, give commingling order number:				
IV.	COMPLETION DATA		New Well Workover Deepen	Plug Back   Same Restv. Diff. Restv.	
	Designate Type of Completio	C11	X		
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded	October 15, 1941	3644		
	August 27, 1941 Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth	
	3350 ' KB	Langlie-Mattix	3515'	3608'	
	Penformicon	Langire medical		Depth Casing Shoe	
	Open hole 3485-3644'			?	
	SPOR III	TUBING, CASING, AND	D CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	1187 t	SACKS CEMENT 200 sacks	
		9" OD	3485	200 sacks	
		7" OD	3463	200 200.00	
	,				
			f and along of land or	il and must be equal to or exceed top allow-	
V	TEST DATA AND REQUEST FOR ALLOWABLE (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)				
	OII. WELL Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etc.)		
		October 15, 1975	Pumping		
	September 24, 1975	Tubing Pressure	Casing Pressure	Choke Size	
	24 hours				
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas-MCF	
	3 barrels fluid	2	$\cdot$ 1	9	
	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test-MCF/D	Length of Test	BDIs. Condensate vivie.		
		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
	Testing Method (pitot, back pr.)	Tubing Pressure (Snut-in)	Sabing Francisco		
			OU CONSERV	VATION COMMISSION	
V	. CERTIFICATE OF COMPLIANCE			1 2) 可能性 1	
	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		
	(SIGNED) LELAND FDANG Leland Franz				
	(Signature)				
	District Production Manager (Title)				
	·				
	November 6, 1975				
			Separate Forms C-104 m	der de tited fot each boot in mersbi	
			TI GAMBISTED WELLS		