## OF COPIES RECEIVED

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A FE		L CONSERVATION COMMISSION ST FOR ALLOWABLE	Form C-104  Supersedes Old C-104 and C-  Effective 1-1-65
D OFFICE	AUTHORIZATION TO T	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  JUL 17 2 18 PH '65	
INSPORTER OIL GAS GAS GRATION OFFICE		OUL 11	
ontor Skelly	Oil Company		
rens box 7	30 - Hobbs, New Mexico	-	
uson(s) for filing (Check proper	box)	Other (Please explain)	
completion		Gas Dedicated to affective July	skelly Penrose "F" Unit   / 1, 1965.
change of ownership give nam	ne Ralph Laws - W	ormerly E. F. King No. 6	
ad address of previous owner_	Midland, Texas		
ESCRIPTION OF WELL AT	Well No. Fool	Name, Including Formation	Kind of Lease
Skelly Penrose "R"	Undt 28 is	nglie Mattix - Penrose So	State, Federal or Fee Fee
- mit detter;	1980 Feet From The North	Line and 1980 Feet From	The <b>East</b>
Line of Section ,	Township 23-3 Range	37-%, NMPM,	County
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL		
Shell Pipe Line Con	rporection	Address (Give address to which appr Sox 1910 - Midland	oved copy of this form is to be sent)
Name of Authorized Transporter of Skelly Oil Company	Casinghead Gas a or Dry Gas	Gas Address (Give address to which approved copy of this form is to be sent)  Box 1135 Eunice, New Maxica	
If well produces oil or liquids,	Unit Sec. Twp. Rge.		hen
give location of tanks.  If this production is commingled	with that from any other lease or poor	· **	?
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v
Designate Type of Comple	Date Compl. Ready to Prod.	Total Depth	
		. Otal Depth	P.B.T.D.
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
		ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST OIL WELL	able for this	after recovery of total volume of load oil depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	ift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Cil-Bbis.	Water-Bbls.	Gas-MCF
GAS WELL			
Autual Fred, 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 COMPLIA	NCE	OIL CONSERVA	ATION COMMISSION
I hereby certify that the rules an	d regulations of the Oil Conservation	APPROVED JUL OF	19:4 , 19
Commission have been complied	with and that the information given the best of my knowledge and belief.		(These
		TITLE Supervisor,	Natrick To 1
The A	100	This form is to be filed in o	compliance with RULE 1104.

(Signature)
Dist Superintendent

JUL 1 5 19CE

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 Sections I, II, III, and VI only 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 completed wells.