NO. OF COPIES RECEIVED			4
DISTRIBUTION			
SANTA FE	NEW MEXICO OIL	CONSERVATION COMMISS	Form C-104
FILE	— REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C-
·····		AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO THE	RANSPORT OIL AND NATURAL	_ GAS
LAND OFFICE		lm 17	2 17 PM '65
TRANSPORTER OIL		OUL 11	5 11 111 UJ
GAS			
OPERATOR			
PRORATION OFFICE			
Aerator Skelly (	Dil Company		
Address	- Hobbs, New Mexica		
Reason(s) for filing (Check proper bo	•	Other (Please explain)	
Hew Well	Change in Transporter of:		Olive 3 3 mg - 13 mg - 12 mg -
itecompletion			Skelly Penrose "B" Unit
Change in Ownership			λ Τ <sup>2</sup> Τλ <u>6</u> Σο
go In Switchamp	Casinghead Gas Cond	iensate	
If change of ownership give name	Palah Ima Pa		
and address of previous owner		rmerly - King "B" No. \$	
DESCRIPTION OF WELL AND	LEASE Midland, Texas		
Skelly Penrose "B" Un	veil No. Pool No. 24 Lan	Name, Including Formation	d. Kind of Lease
Location			State, Federal or Fee
Unit Letter <b>G</b> ; <b>211</b>	7.44 Feet From The North	ine and 1966 Feet Fron	m The <b>East</b>
Unit Letter <b>6</b> ; <b>211</b>			
	7.44 Feet From The North Lownship 23.55 Range	ine and 1966 Feet From 37-4, NMPM,	m The <b>Bask</b> County
Line of Section 6, To  DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	37-1. , NMPM,	<b>Lea</b> County
	TER OF OIL AND NATURAL G	37-1. , NMPM,	Tea
Line of Section , To  DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Oi	TER OF OIL AND NATURAL GOT Condensate	Address Give address to which app	<b>Lea</b> County
DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Or  Shell Pipe Line Corporate of Authorized Transporter of Corporate Of Authorized Transporter of Corporate Of Skelly Oil Company	TER OF OIL AND NATURAL Government of Condensate correction  Is inghead Gas cor Dry Gas Condensate Corp.  Unit Sec. Two. Rage.	Address (Give address to which approximately address to which address to which address to the address to which address to the address to which address to the addr	County  Oved copy of this form is to be sent)
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Date First New Oil Run To Tanks	Date of Test Tubing Pressure	Producing Method (Flow, pu	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test		Casing Pressure	Choke Size	-
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
-			345 MO1	

GAS WELL
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate resting Method (pitot, back pr.) Tubing Pressure Casing Pressure Choke Size

## 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.

JUL 1 5 1965

OIL CONSERVATION COMMISSION

BY Supervisor, District No. 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 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.