## DISTRIBUTION NEW PACKED OIL CONSURVATION COMMESSION 17,11 REQUEST FOR ALLOWABLE Supersedes Old C-101 and to F 1 11 Effective 1-1-65 AND 0.5. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS D OFFICE OIL TRANSPORTER GAS OPERATOR PRORATION OFFICE Operator Getty 011 Company P. O. Box 1351, Midland, Texas 79702 Reason(s) for filing (Check proper box) Other (Picase explain) Change in Transporter of Skelly Oil Company merged with Getty Recompletion OII Dry Gas Oil Company effective 1-31-77 Change in Ownership X Casinghead Gas Condensate If change of ownership give name Skelly Oil Company, P. O. Box 1351, Midland, Texas and address of previous owner. II. DESCRIPTION OF WELL AND LEASE cell No. Pool Name, Including Fermation Kind of Lease Lease No. Myers Langlie-Mattix Unit Langlie-Mattix State, Federal or (Fee) Location 1980 Feet From The NORTH Line and Unit Letter\_ 1980 Feet From The EAST 235 Lea Line of Section 37E Township Range NMPM. III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil or Condensate Address (Give address to which approved copy of this form is to be sent) None - Input Name of Authorized Transporter of Casinghead Gas \_\_\_\_\_ or Dry Gas \_\_\_\_ Address (Give address to which approved copy of this form is to be sent) None Unit Sec. P.ge. Is gas actually connected? If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Workover Deepen Same Restv. Diff. Restv Plug Back Designate Type of Completion -(X)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 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) OIL WELL 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 WELL Actual Prod. Tent-MCF/L Length of Test Bble. Condensate/MMCF Gravity of Condensate Testing Mothed (pitot, back pr.) Tubing Pressure (Shut-in) Coring Pressure (Ehut-in) Choke Size OIL CONSERVATION COMMISSION A. CERTIFICATE OF COMPLIANCE FEB 16 1977 I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. Orig. Signed by Jerry Sexton Dist 1, Supv. This form is to be filed in compliance with RUL! .. 104. (SIGNED) LELAND FRANZ If this is a request for allowable for a newly dill all or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with HULE 111. (Signature) Leland Franz Matrict Production Manager All sections of this form must be filled out completely for allow-(Title)

Fill out only Sactions I, H. III, and VI for changes of owner, well name or number, or trensporter, or other such change of condition.

February 1, 1977.