

46-KMOOD-Hobbs
1-File
1-Engn. Jim
1-Foreman RF
1-Mr. J.A.-Midland
1-Laura Richardson-Midland
1-JA, 1-SH, 1-BB, 1-CP

Getty Oil Company

Address
P.O. Box 730, Hobbs, New Mexico 88240

Reason(s) for filing (check proper box)

New Well ☐ Change in Transporter of:
Recompletion ☒ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ Downhole Commingled Blinebry - Queen

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name G.D. Riggs B	Well No. 8	Pool Name, including Formation Justis Blinebry	Kind of Lease State, Federal or Foreign Federal	Lease No. LC-049436
Location Unit Letter B : 330 Feet From The North Line and 1650 Feet From The East Line of Section 1 Township 26S Range 37E NMPM Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM 88240					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1384, Jal, NM 88252					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 1	Twp. 26S	Rge. 37E	Is gas actually connected? Yes	When 10/6/62

If this production is commingled with that from any other lease or pool, give commingling order number: PC-640

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well	New Well	Workover	Deepen	Plug Back	Same Resrv.	Diff. Resrv.
Date Spudded 9/21/62	Date Compl. Ready to Prod. 2/14/84	Total Depth 5900'	P.B.T.D. 5045'					
Elevations (DF, RKB, RT, CR, etc.) 3030 GL	Name of Producing Formation Blinebry-Langlie Mattix	Top Oil/Gas Pay 3169'	Tubing Depth 5444'					
Perforations 3169-3292 Langlie Mattix and 5111-5402' Blinebry							Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
10 3/4	8 5/8	907	450 sxs					
7 7/8	5 1/2	5900	582 sxs					

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)

Date First New Oil Run To Texas 2/15/84	Date of Test 2/17/84	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 9 bbls	Oil-Bbls. 9	Water-Bbls. 11	Gas-MCF

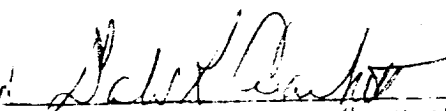
GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (thut-in)	Casing Pressure (thut-in)	Choke Size

CERTIFICATE OF

ILLEGIBLE

I hereby certify that the
Division have been to
above is true and con-


(Signature)
Dale R. Crockett
Area Superintendent

(Date)
February 28, 1984

OIL CONSERVATION DIVISION

MAR 1 1984

APPROVED _____, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
TITLE _____

This form is to be filed in compliance with RULE 1103.
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 allow- able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner- well name or number, or transporter or other such change of condi- tions.
Separate Forms C-104 must be filed for each pool in multi- ple completed wells.