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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator Skelly Oil Company	
Address P. O. Box 1351, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ellen Sims "A"	Well No. 1	Pool Name, Including Formation Langlie-Mattix	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter H ; 1980 Feet From The North Line and 990 Feet From The East				
Line of Section 3 Township 23S Range 37E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
The Permian Corporation	P. O. Box 1183, Houston, Texas 77001			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Lease Fuel				
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 3	Twp. 23S	Rge. 37E
	Is gas actually connected?		When	
	No			

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7/15/73	Date Compl. Ready to Prod. 7/27/73		Total Depth 3800'		P.B.T.D. 3726'			
Elevations (DF, RKB, RT, GR, etc.) 3312' KB	Name of Producing Formation Queen (Penrose Sand)		Top Oil/Gas Pay 3532'		Tubing Depth 3653'			
Perforations					Depth Casing Shoe 3754'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	8-5/8" OD casing		391'		375 sacks			
7-7/8"	5-1/2" OD casing		3754'		600 sacks			
	2-3/8" OD tubing		3653'					

V. 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 Tanks July 27, 1973	Date of Test July 30, 1973	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 23 hours	Tubing Pressure 100#	Casing Pressure 0# (packer)	Choke Size 32/64"
Actual Prod. During Test	Oil-Bbls. 131 barrels	Water-Bbls. 0	Gas-MCF 39.3

GAS WELL

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

(Signed) **C. J. LOVE** **C. J. Love**

(Signature)

District Production Manager

(Title)

August 2, 1973

(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG 6 1973**, 19

BY **[Signature]**

TITLE **[Signature]**

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 only Sections I, II, III, and VI 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.