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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form C-101
Supersedes Old C-101 and C-102
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

5-NMOCB-Hobbs
1-Admin. Unit-Midland
1-File
1-BW
1-JDM-Engr.
1-BWI-Foreman
11-WIO's

Operator
Getty Oil Company

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

Reason(s) for filing (Check proper box)

New Well ☒
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Myers Langlie Mattix Unit	29	Langlie Mattix	State, Federal or Fee	-----
Location				
Unit Letter	J	2080 Feet From The	South Line and	1880 Feet From The
Line of Section	30	Township	23-S	Range
				37-E
				NMPM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Company	P.O. Box 1510, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P.O. Box 1492, El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. G 5 24-S 37-E
Is gas actually connected?	When yes 9-25-81

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Res'v. ☐	Diff. Res'v. ☐
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
5-4-81	9-25-81		3770'		3729'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
3334' GL	Langlie Mattix		3551'		3692'			
Perforations					Depth Casing Shoe			
3572-3615								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8	504	350 sxs, 110 sxs.ci
7 7/8	5 1/2	3770	100 sxs, 100 sxs.circ.

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9-25-81	10-15-81	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 Hours	144	-----	-----
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
92	56	36	122

GAS WELL

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

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.


Dale R. Crockett (Signature)
Area Superintendent
October 30, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY _____
Orig. Signed By
Jerry Sexton

TITLE _____
Dist 1, Sub

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 deviated points 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.