	DISTRIBUTION SANTA FE		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C Effective 1-1-65	
T	FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS OPEF - TOH PROFATION OFFICE	AUTHORIZATION TO TRA	AND ANSPORT OIL AND NATURAL		
.	Operation Getty Reserve Oil, Inc.				
	Address				
	Reason(s) for filing (Check proper box)	, Midland, Texas 797	Other (Please explain)		
	New Well	Change in Transporter of: Cil Dry Gas Change effective 1-23-80			
	Recompletion Change in Ownership X				
	If change of ownership give name Reserve Oil, Inc., 312 HBF Building, Midland, Texas 79701				
п.	DESCRIPTION OF WELL AND LEASE Lease Name Vell No. Pool Name, Including Formation Kind of Lease Numbers No. Pool Name, Including Formation				
	Cooper Jal Unit	116 Langlie Mat		NM ^{ase} No eral or Fee Federal 032161	
	Location	C - 41-	(/ 0	TIT	
		Feet From TheSouth Lin		m The West	
	Line of Section 18 Towns		37-Е , NMPM,	Lea County	
III.	WATER INJECTION W DESIGNATION OF TRANSPORTE	R OF OIL AND NATURAL GA	15		
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which app	roved copy of this form is to be sentj	
	Name of Authorized Transporter of Casing	head Gas or Dry Gas	Address (Give address to which app	roved copy of this form is to be sent)	
	If well produces oil or liquids, U give location of tanks.	nit Sec. Twp. P.ge.	Is gas actually connected?	When	
137	If this production is commingled with t	that from any other lease or pool,	give commingling order number:		
1 v .	COMPLETION DATA Designate Type of Completion	- (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res	
		ate Compl. Ready to Prod.	Total Derth	P.B.T.D.	
	Elevations (DF, RAB, RT, GR, etc.) N	ame of Producing Formation	Top Oli/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		ALLOWARTE (Test must be)	il and must be equal to as esceed ton all	
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 all able for this depth or be for full 24 hours) Date First New Oil Bun To Tenks Date of Test Producing Method (Flow, pump, gas lift, etc.)				
	Date First New Oil Run To Tanks D	ate of Test	Producing Method (ribw, pump, gas	<i>iijt, cic.)</i>	
	Length of Test	ubing Prossus	Casing Pressure	Choke Size	
	Actual Fied, During Test O	11-Bbis.	Water - Bbls.	Gas-MCF	
	GAS WELL Actual Prog. Tool-MCF/D	ength of Teat	Bbls. Condensate/MMCF	Gravity of Condensate	
	Teating Mothed (pilot, back pr.)	ubing Pressure (Shut-in)	Casing Pressure (Bhut-in)	Choke Size	
			OIL CONSERV	VATION COMMISSION	
VI.	I. CERTIFIC THE OF COMPLIANCE		FFB1	5 1980	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given				
	above is the and complete to the best of my knowledge and belief.		Jerry	DYOrig. Signed by Jerry Sexton	
			This form is to be filed in compliance with NULE 1104.		
	Carence R. Chandler		If this is a request for allowable for a newly drilled or deepen well this form must be succempanied by a tabulation of the deviation		
	(Supation) Assistant District Manager		trate taken on the well in accordance with RULE 111. All accisons of this form must be filled out completely for allo		
	(Fule)		All sections of this form must be the out completely for site able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of ov		
	January 31, 1980 (hate)		well name or number, or tranap	II, III, and VI for changes of ov- biter, or other such change of con-	
			completed wells.		

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FEB 1 1980 OIL CONSERVATION DIV.

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