

DISTRIBUTION

SANTA FE

FILE

U.S.G.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

OPERATOR

PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

5 - NMOC - Hobbs

1 - File

1 - Midland

Form C-104

Supersedes Old C-104 and C-1

Effective 1-1-65

Operator

Getty Oil Company

Address

P.O. Box 730, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Casinghead Gas

Dry Gas

Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

Getty Reserve Oil, Inc., 312 HBF Bldg. Midland, TX 79701

This change effective 8/1/80

DESCRIPTION OF WELL AND LEASE

Lease Name

Cooper Jal Unit

Well No.

128

Pool Name, including Formation

Langlie Mattix

Kind of Lease

State, Federal or Fee

FEDERAL

Lease No.

NM032161

Location

Unit Letter

E

Feet From The

1650

North Line and

330

Feet From The

West

Line of Section

19

Township

24-S

Range

37-E

NMPM

Lea

County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

Shell Pipe Line Company

Address (Give address to which approved copy of this form is to be sent)

Box 2648, Houston, TX 77001

Name of Authorized Transporter of Casinghead Gas

El Paso Natural Gas Company

Address (Give address to which approved copy of this form is to be sent)

Box 1492, El Paso, TX 79978

If well produces oil or liquids, give location of tanks.

Unit

J

Soc.

24

Twp.

24-S

Rge.

36-E

Is gas actually connected?

Yes

When

1954

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

R-663

COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

Gas Well

New Well

Workover

Deepen

Plug Back

Stim Res'n.

Perf. Res'n.

Date Spudded

Date Compl. Ready to Prod.

Total Depth

P.B.T.D.

Elevations (DF, RKB, RT, CR, 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

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead 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.)

Length of Test

Tubing Pressure

Casing Pressure

Choke Size

Actual Prod. During Test

Oil-Bbls.

Water-Bbls.

Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Lbbs. Condensate/MMCF

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.

AREA SUPERINTENDENT

September 19, 1980

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

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 portions of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Portions I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.