

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 - NMOCDC - Hobbs
1 - File
1 - Midland

Form C-104
Supersedes Old C-101 and C-111
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 ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name and address of previous owner
Getty Reserve Oil, Inc., 312 HBF Building, Midland, TX 79701
This change effective 8/1/80

DESCRIPTION OF WELL AND LEASE
Lease Name Cooper Jal Unit Well No. 129 Pool Name, including Formation Langlie Mattix Kind of Lease State, Federal or Fee Federal Lease No. NM032161
Location
Unit Letter F : 1650 Feet From The North Line and 1587 Feet From The West
Line of Section 19 Township 24-S Range 37-E, NMPLM, Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Shell Pipe Line Company Box 2648, Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
El Paso Natural Gas Company 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

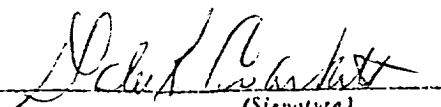
If this production is commingled with that from any other lease or pool, give commingling order number: R-663

COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Sure Restv. Full Restv.
Date Spudded Date Compl. Ready to Prod. Total Depth P.D.T.D.
Elevations (DF, RKB, RT, GR, 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 Ran 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. GOR-MCF

GAS WELL
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MCF Gravity of Condensate
Testing Method (pilot, 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
(Date)

OIL CONSERVATION COMMISSION
SEP 26 1980
APPROVED _____, 19____
BY _____ Orig. Signed by John Ranyan
TITLE _____ Geologist
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 deviate 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 re-completed 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 conditions.