

NO. OF COPIES RECEIVED		NEW MEXICO OIL CONSERVATION COMMISSION		Form C-101 Supersedes Old C-101 and C-1 Effective 1-1-65	
DISTRIBUTION		REQUEST FOR ALLOWABLE AND			
LAND OFFICE		AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
TRANSPORTER		5 - NMOCD - Hobbs			
OPERATOR		1 - File			
PRODUCTION OFFICE		1 - Midland			
GETTY OIL COMPANY					
P.O. BOX 730, Hobbs, NM 88240					
Reason(s) for filing (Check proper box)			Other (Please explain)		
New Well ☐			Change in Transporter of:		
Recompletion ☐			Oil ☐ Dry Gas ☐		
Change in Ownership ☒			Casinghead Gas ☐ Condensate ☐		
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		Well No.		Pool Name, including Formation	
Woolworth B		1		Jalmat Oil	
Kind of Lease		State, Federal or Fee		Lease No.	
State, Federal or Fee		Fee			
Location					
Unit Letter D : 330 Feet From The North Line and 4290 Feet From The East					
Line of Section 17 Township 25-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)		
None (Well shut-in)					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐			Address (Give address to which approved copy of this form is to be sent)		
None (Well shut-in)					
If well produces oil or liquids, give location of tanks.			Is gas actually connected? When		
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 Sore Res. Eff. Res.					
Date Spudded		Date Compl. Ready to Prod.		Total Depth	
				P.D.T.D.	
Elevations (DF, R&B, 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	
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 oil able 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-Gals.		Water-Bbls.	
				Gas-MCF	
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.					
OIL CONSERVATION COMMISSION					
APPROVED _____, 19__					
BY _____					
Orig. Signed by					
John Runyan					
Geologist					
TITLE _____					
This form is to be filed in compliance with RULE 1104.					
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the development tests taken on the well in accordance with RULE 111.					
All sections of this form must be filled out completely for all					