

SALE PRICE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form No. 7-103
Superseding OIL C-101 and C-1
Effective 1-1-65

Operator Getty Reserve Oil, Inc.	
Address 312 HBF Building, Midland, Texas 79701	
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 ☐

If change of ownership give name and address of previous owner Reserve Oil, Inc., 312 HBF Building, Midland, Texas 79701
This change effective 1-23-80

I. DESCRIPTION OF WELL AND LEASE

Lease Name South Langlie Jal Unit	Well No. 27	Pool Name, including Formation Jalmat (Oil)	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location Unit Letter <u>N</u> ; <u>990</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>West</u>					
Line of Section <u>17</u> Township <u>25-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> County					

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Shell Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Box 2648, Houston, Texas 77001				
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas 79900				
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 7	Twp. 25-S	Rge. 37-E	Is gas actually connected? When Yes 1952

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

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Shut Res'v.	Unil. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.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

III. 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.)	
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	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

IV. 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.

Clarence R. Chandler
(Signature)
Assistant District Manager
(Title)
January 29, 1980
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 11 1980, 19____
BY Jerry Sexton Orig. Signed By
TITLE Dist. 1, Supv.

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 completion 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 ~~deepened~~ 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 conditions.