

SANTA FE  
FILE  
U.S.G.S.  
LAND OFFICE  
TRANSPORTER OIL GAS  
OPERATOR  
PRODUCTION OFFICE

NEW MEXICO OIL AND NATURAL GAS CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-101 and C-  
Effective 1-1-65

Operator  
Getty Reserve Oil, Inc.  
Address  
312 HBF Building, Midland, Texas 79701  
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 Reserve Oil, Inc., 312 HBF Building, Midland, Texas 79701  
This change effective 1-23-80

II. DESCRIPTION OF WELL AND LEASE  
Lease Name South Langlie Jal Unit Well No. 14 Pool Name, including Formation Jalmat (Oil) Kind of Lease State, Federal or Fee Fee Lease No.  
Location  
Unit Letter D : 990 Feet From The North Line and 466 Feet From The West  
Line of Section 17 Township 25-S Range 37-E, NMPM, Lea County

III. 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)  
Shell Pipe Line Company Box 2648, Houston, Texas 77001  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)  
El Paso Natural Gas Company 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? Yes When 1949

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

V. COMPLETION DATA  
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Drill. Res'v.  
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

VI. 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 allowable for this depth or be for full 24 hours)  
OIL WELL  
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/MCF Gravity of Condensate  
Testing Method (pilot, back pr.) Tubing Pressure (shut-in) Casing Pressure (shut-in) Choke Size

VII. 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  
January 29, 1980  
(Date)  
OIL CONSERVATION COMMISSION  
FEB 15 1980  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
Signed by \_\_\_\_\_  
BY \_\_\_\_\_, Sexton  
Dist. 1, Supv.  
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 deviated tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted 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 condition.