

U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

AND
AUTORIZATION TO TRANSPORT OIL AND NATURAL GAS

5-NMOCC
1- W.L. Boone - Houston
1-R. L. White - Midland

Operator
GETTY OIL COMPANY

Address
P. O. BOX 249, HOBBS, NEW MEXICO 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

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name A. B. COATES "C"	Well No. 6	Pool Name, Including Formation JUSTIS MONTOYA	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter <u>B</u> ; <u>660</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>EAST</u>				
Line of Section <u>24</u> Township <u>25-S</u> Range <u>37-E</u> , NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> SHELL PIPELINE COMPANY	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1384, Jal, New Mexico
If well produces oil or liquids, give location of tanks.	Unit <u>B</u> Sec. <u>24</u> Twp. <u>25</u> Rge. <u>37</u> Is gas actually connected? <u>YES</u> When <u>3-24-74</u>

If this production is commingled with that from any other lease or pool, give commingling order number: PLC-33

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back	Same Res'v. <input checked="" type="checkbox"/>	Diff. Res'v.
Date Spudded REWORK 3-12-74	Date Compl. Ready to Prod. 3-24-74	Total Depth	P.B.T.D. 6970					
Elevations (DF, RKB, RT, GR, etc.) 3083 D.F.	Name of Producing Formation MONTOYA	Top Oil/Gas Pay	Tubing Depth 6831					
Perforations 6706-26; 6742-44; 6758-62; and 6766-80'.	Depth Casing Shoe 7983'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/4"	414'	400 Sacks
12-1/4"	9-5/8"	4860'	1425 Sacks
8-3/4"	7"	7894'	800 Sacks
6-1/4"	5"	8166'	60 Sacks
	2-3/8"	6765'	

V. 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 3-24-74	Date of Test 3-28-74	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24	Tubing Pressure -	Casing Pressure -	Choke Size 2"
Actual Prod. During Test 199	Oil-Bbls. 88	Water-Bbls. 111 (LOAD WATER)	Gas-MCF 465

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

VI. 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.

Eugene J. Miller
(Signature)
Eugene J. Miller, AREA ENGINEER
(Title)
MARCH 29, 1974
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY [Signature]
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 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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.