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| TRANSPORTER | OIL GAS |
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
Orig & Acc: MEMOC
Acc: H. E. Berg
Acc: R. H. Coe
Acc: File

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Getty Oil Company
Address
P. O. Box 249, Hobbs, New Mexico
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: Tidewater Oil Company, Box 249, Hobbs, New Mexico

II. DESCRIPTION OF WELL AND LEASE

| | | | |
|--|---|--|---------------------------|
| Lease Name A. B. Coates "C" | Well No./ Pool Name, including Formation 13 Justis Gas(Glorieta) | Kind of Lease State, Federal or Free Federal | Lease No. LC-032650(b) |
| Location Unit Letter K, 1980 Feet From The South Line and 2310 Feet From The West Line of Section 24 Township 25S Range 37E, N.M.C. 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"/> Texas New Mexico Pipeline Co. | Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79714 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co. | Address (Give address to which approved copy of this form is to be sent) Box 1384, Jol, New Mexico 88252 | |
| If well produces oil or liquids, give location of tanks. Unit K, Sec. 24, Twp. 25S, Rng. 37E | Is gas actually sold? Yes | When |

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) <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Old Well <input type="checkbox"/> Deepener <input type="checkbox"/> Plug and Abandon <input type="checkbox"/> Partial Plug and Abandon | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | Perforations |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Total Length |
| TUBING, CASING, AND CEMENTING RECORD | | Length casing Shoe | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | |
| | | | |
| | | | |

VI. 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 (2000 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 (pitot, 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.

P. E. Wade
(Signature)

Area Superintendent

(Title)

September 30, 1967

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____ 19_____
BY _____
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.