

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

4046-NMOCD-Hobbs

1-File

1-Engr Jim

1-Foreman CK

1-JA, 1-BB, 1-CP, 1-CB

1-Mr. J.A.-Midland

1-Laura Richardson-Midland

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

TO: ADDRESS RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator
Getty Oil CompanyAddress
P.O. Box 730, Hobbs, NM 88240

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change Zones

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name A.B. Coates "C"	Well No. 7	Pool Name, Including Formation Justis Field Tubb/Dr.	Kind of Lease State, Federal or Fee	Lease No. LC-032650F
Location Unit Letter J : 1980 Feet From The North Line and 1980 Feet From The East Line of Section 24 Township 25S Range 37E, NMPM, Lea County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp.	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 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 88252					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input checked="" type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod. 12/5/83		Total Depth 8065'		P.B.T.D. 6425'			
Elevations (DF, RAB, RT, GR, etc.) 3089' DF	Name of Producing Formation Justis Tubb		Top Oil/Gas Pay 5625'		Tubing Depth 6400'			
Perforations 5625-5812', 1 SPF, 52 holes				Depth Casing Shoe				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	13 3/8"	535'	Cmt. Circ.
	9 5/8"	3384'	"
	7"	7937'	800 SXS

IV. 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 12/5/83	Date of Test 12/9/83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls. 74	Water-Bbls. 148	Gas-MCF 12 MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

V. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Dale R. Crockett Dale R. Crockett
(Signature)
Area Superintendent ADB
(Title)
December 12, 1983
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 15 1983, 19
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT SUPERVISOR

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 calculation of the deviation 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 recompleted wells.
Fill out only Sections I, II, III, and VI for change of ownership, well name or number, or transporter, or other such change of condition.
Sections I, II, III, and VI must be filled for each pool in a multi-

0+6-NMOCD-Hobbs

1-File

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1-H.O. Woods-Midland

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form 1-102
Supersedes 1-128
Effective 1-1-83

All distances must be from the outer boundaries of the well.

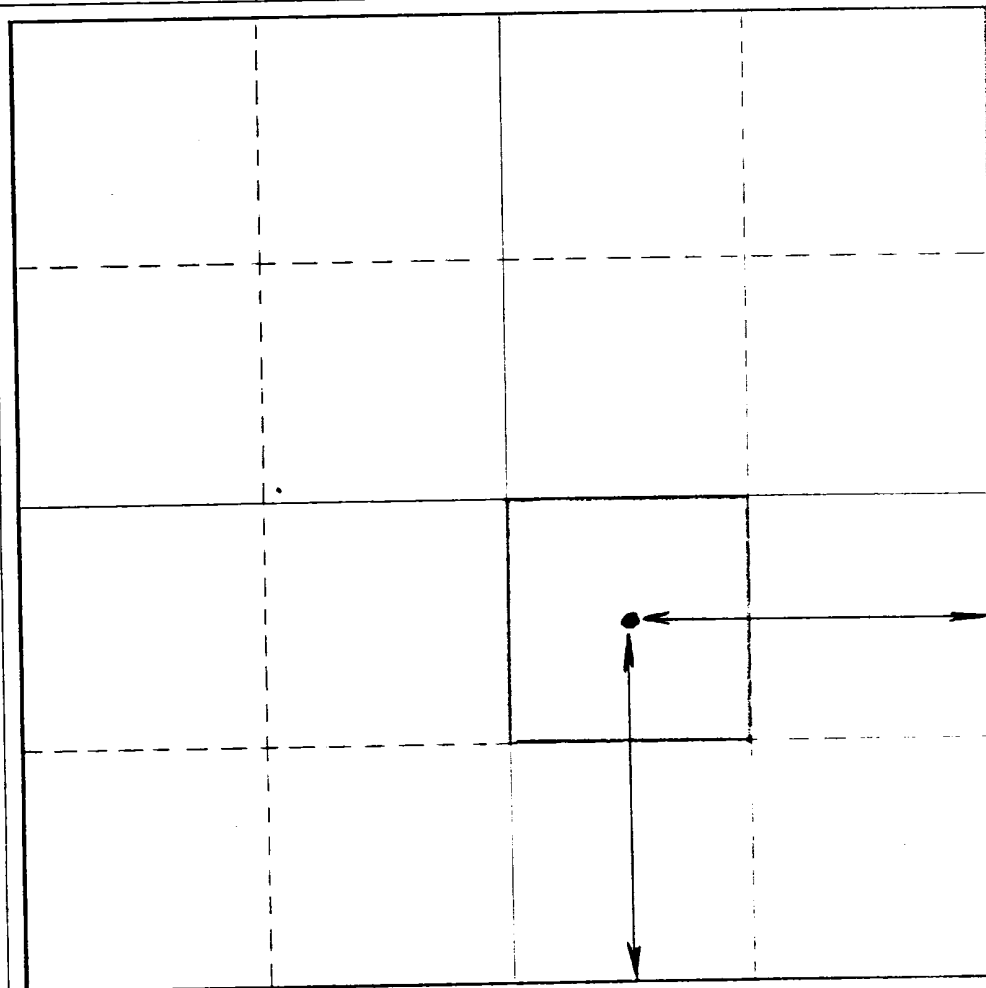
Operator Getty Oil Company		Lease A.B. Coates "C"		Well No. 7
Unit Letter T	Section 24	Township 25S	Range 37E	County Lea
Actual Footage Location of Well:				
1980 feet from the North		1980 feet from the East		
Ground Level Elev. 3089' DF	Producing Formation Tubb	Pool Justis Tubb Drinkard	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Dale R. Crockett *dy*

Dale R. Crockett

Area Superintendent

Getty Oil Company

Date
December 13, 1983

dy

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Signature

Signature of Registered Surveyor or Licensed Professional Engineer

Signature

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600 6930 7260 7590 7920 8250 8580 8910 9240 9570 9900