• .	5/ TAFC F3 E G S	REQUEST FOR ALLOWABLE AND		Supersodes Old C-104 and t. Effective 1-1-65	
	INANSPORTER OIL OIL OPERATOR PROBATION OFFICE	AUTHORIZATION TO T	RANSPORT OIL AND NATU		
-	Getty Oil Company		I has here fair M		
	Address P. O. Box 1351, Midland, Texas 79702				
	Reoson(s) for filing (Check proper bo New Well	Change in Transporter of;	Other (Please explain		
Recompletion Oii Dry Gas Change in Ownership X Casinghead Gas Condensate				Skelly Oil Company merged with Getty Oil Company effective 1-31-77	
	If change of ownership give name and address of previous owner	change of ownership give name d address of previous owner			
11	DESCRIPTION OF WELL AND	RIPTION OF WELL AND LEASE Name Well No. Pool Name, Including Formation Kind of Lease			
West Dollarhide Drinkard 48 Dollarhide Tubb-Drinkard State Federal br Fee				Lease No.	
	Unit Letter <u>C</u> ; <u>990</u> Feet From The <u>Noi27 H</u> Line and <u>2310</u> Feet From The <u>WEST</u>				
	31		38E , NMPM,	Lea County	
III	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS		
	Nome of Authorized Transporter of Ol	I X or Condensate	Address (Give address to which	approved copy of this form is to be sent)	
	Texas-New Mexico Pipeline Company Name of Authorized Transporter of Casinghead Gas [x] or Dry Gas [] El Paso Natural Gas Company		P. O. Box 1510, Midland, Texas 79702 Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79999		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Ege. $D + 37 + 245 + 38E$	is gas actually connected?	When	
IV	If this production is commingled wi	ith that from any other lease or pool	1es	. <u>N A</u>	
14.	COMPLETION DATA Designate Type of Completi	on - (X)	New Well Workover Deepe	en Plug Back Same Res'v. Diff. Res's	
	Date Spudded	Date Compl. Ready to Prcd.	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, AN	O CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
				· · · · · · · · · · · · · · · · · · ·	
			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
v.	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow- II. WEII. able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, g	as ļift, etc.)	
	Longth of Test	Tubing Pressure	Casing Processe	Choke Size	
	Actual Prod. During Test	Oll-Bble.	Water • Bbls.	Gas - MCF	
•	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Mothod (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
ן או.	CERTIFICATE OF COMPLIANC)E	OIL CONSER	VATION COMMISSION	
1	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED FEB 10 19/7		
(Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Sexton		
			TITLE		
_	(SIGNED) LELAND FRANZ		This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or deepened		
		(Signature) Leland Franz District Production Manager		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.	
-	(Tub	(Tule) February 1, 1977		All sections of this form must be filled out completely for allow- able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, -	
-	(Pati	Contraction of the second se		, II, III, and VI for changes of owner, porter, or other such change of condition.	