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SANTA FE	<u> </u>		
FILE			
U.S.G.S.	<u> </u>		
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROFATION OF			

ı.

## NEW MEXICO OIL CONSERVATION COM TION

Form C-104

SANTA FE				REQUEST	FOR ALL	OWABLE	Superardes Elloctivo 1	Old C-104 and C-11	
U.S.G.S.			AUTHORIZATIO	N TO TRA	AND ANSPORT (	OIL AND		-1-01	
LAND OFFICE								· · · ·	
TRANSPORTER GAS	:		· 	•					
PROFATION OFFICE									
Operator Getty Re	SART	· · ·	il Inc				<del></del>		
Address				707	01	<del></del>			
Reason(s) for filing (Check			ng, Midland, Te	Xas 191		ther (Plea	se explain)		
New Well			Change in Transporter	r of:		·	, ,		
Recompletion  Change in Ownership X			Cil Casinghead Gas	Dry Go Conde	77	Chang	e effectiv	e 1-23-80	
If change of ownership gand address of previous		ne	Reserve Oil,	Inc.,	312 HBI	Build	ing, Midl	and, Texas	79701
DESCRIPTION OF WE	LLA	ND I	EASE						
Lease Name Cooper J	Tal U	nit	204 Jalm	-	ormation		State, Federal		Lease No.
Location F		198	30 N	iorth	10	80	_ <del></del>	West	
Unit Letter	:		Feet From The N	Lir		-	Feet From T	he West	
Line of Section 24		Tow	nship 24-S	Range	36-	E, NMP	м,	Lea	County
DESIGNATION OF TR				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					-
Shell Pip					1			ed copy of this form Texas 7700	
Name of Authorized Transp				Gas	Box 2648, Houston, Texas 7 Address (Give address to which approved copy of this				is to be sent)
If well produces cil or liqu			Gas Company Unit   Sec.   Twp.	P.ge.	Is gas actu			Texas 7997	8
give location of tanks.				S 36-E	·			Unknov	wn ·
If this production is common the COMPLETION DATA	ningled	with					<del></del>	R-663	
Designate Type of	Compl	etion		Gas Well	New Well	Workover	Deepen	Plug Back Same	Restv. Diff, Restv.
Date Spudded			Date Compl. Ready to Pres	<b>a.</b>	Total Depth	. <del> </del>		P.B.T.D.	
Elevations (DF, RAB, RT,	GR, etc	.,	Name of Producing Format	ion	Top O!l/Ga	s Pay		Tubing Depth	
Perforations					L			Depth Casing Shoe	
HOLE SIZE			TUBING, CA		CEMENTI	DEPTH S		SACKS C	EMENT
TEST DATA AND REG	)1:ES7	· FO	PALLOWARIE (T.	et must be a	(res see on early)	of total wal	uma of load oil a		or exceed top allow-
OH. WELL  Date First New Cil Run To					p:h or be for j	full 24 hour			or excess top attour
Date First New Oll Run 10	Gnks		Date of Isst		Producting N	ervog (t. to	v, pump, gas siji	, e.c.,	ł
Length of Teat			Tubing Pressure		Casing Pres	isut <del>o</del>		Choka Size	
Actual Pred, During Test			Oil-Bhla.		Water-Bbis	·		Gaa-MCF	
					<u> </u>				
GAS WELL		·····							<del></del>
Actual Prod. Test-VCF/D	*		Length of Test		Bbls. Cends	ina sto/MMC	iF	Gravity of Condense	ate .
Testing Method (pitot, bac)	pr.)		Tubing Pressure (Shet-in	,)	Casing Pres	aure (Bhui	:-in)	Chok+ Size	
CERTIFICATE OF CO	MPLI	ANCI	E					TION COMMISSI	ION
. haraha narrifo that that	rules a	nd tea	gulations of the Oil Cor	nervation	APPROV		ER TO		_, 19
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.		Orig. Signed by  Jerry Sexton							
		TITLE Dist 1, Supre							
<b>~</b> ~		0	M			form in to	be filed in co	ompliance with RU	LE 1104.
Carena K. Chardle			If this	If this is a inquest for allowable for a nawly drilled or despended well, this form must be accompanied by a tabulation of the deviation					
Assistant			t Manager	<i>.</i>	tents tak	on the	well in accord	ance with MULE	111.
Januar <b>y</b> 3		980			upla on n	iaw and re	completed wel	la.	
Julianty		Dure			well name	out only	irctions I. II.	III, and VI for cl	inge of condition.

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. Fill out only operation of well name or number, or transporter, or other such change of conditions.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

RECEIVED

OIL CONSERVATION DIV.