	NO. OF COPPLY BULLION DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS OPERATOR PROFINTION OFFICE	REQUEST	CONSERVATION COP SION FOR ALLOWABLL AND ANSPORT OIL AND NATURAL	Form C-104 Superzedes Old C-104 and C-11 Elfoctive 1-1-65 GAS
3.	Operator			
	Getty Reserve Oil, Inc.			
:	312 HBF Building, Midland, Texas 79701 Reoson(s) for filing (Check proper box) Other (Please explain)			
	New Well L Recompletion Change in Ownership X	Change in Transporter of: Cil Dry G Casinghead Gas Conde	Change effecti	ve 1-23-80
	If change of ownership give name and address of previous owner	Reserve Oil, Inc.,	312 HBF Building, Mid	land, Texas 79701
п.	DESCRIPTION OF WELL AND			
	Cooper Jal Unit	well No. Pool Name, Including F 229 Jalmat		al or Fee Fee
	Location Unit Letter E : 165	50 Feet From The North Lin	re and 990 Fact From	The West
		waship 24-S Pange	36-E , NMPM,	Leo
		TER OF OIL AND NATURAL GA		Lied County
	Nome of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	-
	Shell Pipe Line Name of Authorized Transporter of Cas	singhead Gas 🕅 or Dry Gas 🗍	Box 2648, Houston, Address (Give address to which appro	Texas 77001 oved copy of this form is to be sent)
	El Paso Natura	l Gas Company	Box 1492, El Paso, Is gas actually connected?	Texas 79978
	give location of tanks.	J 24 24-S 36-E	Yes	Unknown
	If this production is commingled win COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	R-663
	Designate Type of Completio	on = (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
	Date Spudded	Date Compl. Ready to Pred.	Total Depth	P.B.T.D.
	Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforationa			Depth Casing Shoe
ļ	TUBING, CASING, AND CEMENTING RECORD			
ł	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
ł		<u> </u>		
F				
	TEST 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-			
Ī	OII. WEI.I. able for this depth or be for full 24 hours) Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)			fi, e;c.)
ŀ	Longth of Teat	Tubing Pressure	Casing Pressure	Choka Size
	Actual Pred. During Test	Oil-Bhla.	Water-Bbis.	Gas-WCF
ſ	GAS WELL Actual Prog. Test-WCF/D	Longth of Test	Bbls. Condensate/MMCF	Gravity of Condensate
ŀ	Testing Mothed (pilot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Chok+ Siz+
ן ז. נ	CERTIFICATE OF COMPLIANC	L CE	OIL CONSERVA	TION COMMISSION
Ŧ	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED FEB 11	
C	Commission have been complied w bove in true and complete to the	ath and that the information given	Orig. Signed By BYSexton Diff 1, Supv,	
	Assistant District Manager		This form is to be filed in compliance with RULE 1104. Mothin is a request for allowable for a newly drilled or despend- 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 allow-	
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•				
	January 31, 198	0	Fill out only Sections I. II. III, and VI for changes of owner,	
(laire)			well name or number, or transporter, or other such change of condition. Suparate Forms C-104 must be filed for each pool in multiply	