

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

Form O-104
Supersedes Old O-104 and
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

STATE			
COUNTY			
CITY			
OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRODUCTION OFFICE			
Operator Getty Oil Company			
Address P. O. Box 1351, Midland, Texas 79702			
Reason(s) for filing (Check proper box)			
New Well	☐	Change in Transporter of:	Other (Please explain)
Recompletion	☐	Oil ☐	Skelly Oil Company merged with Getty
Change in Ownership	☒	Casinghead Gas ☐	Oil Company effective 1-31-77
		Dry Gas ☐	
		Condensate ☐	
If change of ownership give name and address of previous owner Skelly Oil Company, P. O. Box 1351, Midland, Texas 79702			

II. DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
Myers Langlie-Mattix Unit	192	Langlie-Mattix	State, ☒ Federal Fee LC-032
Location			Lease No. 339 (A)
Unit Letter C	550	Feet From The North	Line and 2080
		Feet From The	WEST
Line of Section 10	Township 24s	Range 37E	NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)		
TEXAS-NEW MEXICO PIPELINE COMPANY	P.O. Box 1510 Midland Texas 79702		
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas Company	P. O. Box 1492, El Paso, Texas 79999		
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 10	Twp. 24s
			Rge. 37E
			Is gas actually connected? Yes
			When UNKNOWN

IV. COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas well	New Well	Workover	Deepen	Plug Back	Shut Res'y.	Diff. Res'y.
Date Spudded	Date Compl. Ready to Prod.	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, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

V. 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 (Flow, 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 (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED FEB 16 1977	
(SIGNED) LELAND FRANZ		BY _____	
(Signature) Leland Franz		Orig. Signed by Jerry Sexton	
District Production Manager		Dist I, Supv.	
February 1, 1977		This form is to be filed in compliance with RULE 1104.	
(Date)		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 made taken on the well in accordance with RULE 111.	
		All sections of this form must be filled out completely for allowable on new and re-completed wells.	
		Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of condition.	