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PRODUCTION OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

(Form C-104)
Revised 7/1/57

Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Roswell, New Mexico

October 27, 1964

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Jack L. McClellan & Len Mayer

(Lease)

Well No. 1, in NE 1/4 Sw 1/4,

(Company or Operator)

K

Sec. 23

T 10-S

R 32-E

NMPM.

Mescalero

Pool

Unit Letter

Lea

County. Date Spudded 10/9/64

Date Drilling Completed 10/25/64

Elevation 4349 DF

Total Depth 4214 PBTD 4186

Top Oil/Gas Pay 4093

Name of Prod. Form. San Andres

PRODUCING INTERVAL -

Perforations 4093, 97, 4101, 05, 11, 15, 26, 35, 52, 54

Open Hole Depth 4201 Casing Shoe Depth 4062 Tubing

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls. water in hrs, min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 336 bbls. oil, 0 bbls. water in 24 hrs, 0 min. Size 2"

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 5000 gals. 15% NE acid

Casing Press. open Tubing Press. 100 Date first new oil run to tanks 10/27/64

Oil Transporter This information will be furnished later

Gas Transporter

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved, 19

Jack L. McClellan & Len Mayer

(Company or Operator)

By:

Jack L. McClellan (Signature)

Title

Co-Operator

Send Communications regarding well to:

Name Jack L. McClellan

Address Box 848, Roswell, New Mexico

OIL CONSERVATION COMMISSION

By:

Title