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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

C/SF
Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65
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SEP 5 1980
O. C. D.
ARTESIA, OFFICE

Operator
McClellan Oil Corporation
Address
Drawer 730, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)		Other (Please explain)
New Well	☒	Change in Transporter of:
Recompletion	☐	Oil ☐
Change in Ownership	☐	Casinghead Gas ☐
		Dry Gas ☒
		Condensate ☐

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE		R-7143	1/26/83
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
PJ Federal	1	Wildcat	S. Pecos Slope Abo Gas
Location		State, Federal or Fee	Lease No.
Unit Letter J ; 1980 Feet From The South Line and 1980 Feet From The East		Fed.	NM-1159
Line of Section 6	Township 9-S	Range 26-E	County Chaves

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil ☐ or Condensate ☐			
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐		Address (Give address to which approved copy of this form is to be sent)	
Transwestern Pipeline Co.		Box 2521 Houston Texas 77001	
If well produces oil or liquids, give location of tanks.	Unit	Soc.	Twp.
			Pge.
			Is gas actually connected? yes
			When 8-22-80

If this production is commingled with that from any other lease or pool, give commingling order number:

III. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty. Phil. Res'ty.
Designate Type of Completion - (X)			X	X				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
4/24/80	5/30/80	4700	4685					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3722 G.L.	Abo	4334	4306					
Perforations		Depth Casing Shoe						
4334, 36, 41, 42, 44, 46, 48, 53, 54, 56, 4462, 64, 94, 96, 4400, 4475, 77, 4512, 14		4699						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
10-3/4"	8-5/8"	859	350 circ.					
7-7/8"	4 1/2"	4700	360 sx					
	2 3/8"	4306						

IV. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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/MMCF	Gravity of Condensate
2075	4 hrs.	0	NA
Testing Method (flow, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
4-Point	1100	1100	Various

CERTIFICATE OF COMPLIANCE

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.

J. McCall
(Signature)
Operator
(Title)
9/3/80
(Date)

OIL CONSERVATION COMMISSION
SEP 10 1980
APPROVED
BY **W. A. Gussert**
TITLE **SUPERVISOR, DISTRICT II**
This form is to be filed in compliance with RULE 1104.
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 tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleting wells.
Fill out only Sections I, II, III, and IV for changes of owner, well name or number, or transporter, or other such change of condition.