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| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | ✓ |
| OPERATOR | | ✓ |
| PRORATION OFFICE | | |

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

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JUN 17 1983

| | | |
|---|--|---|
| Operator | McClellan Oil Corporation ✓ | O. C. D. |
| Address | P.O. Drawer 730, Roswell, New Mexico 88202 | ARTESIA, OFFICE |
| Reason(s) for filing (Check proper box) | | Other (Please explain) |
| New Well | <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion | <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

| | | | | |
|-----------------------|----------|--|-------------------------------|---------------------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| McClellan Federal MOC | 5 | Pecos Slope Abo | State, Federal or Fee Federal | NM-36409 |
| Location | | | | |
| Unit Letter | B | 660 Feet From The North Line and 1980 Feet From The East | | |
| Line of Section | 30 | Township 5-S | Range 25-E | NMPM, Chaves County |

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|--|---------------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Transwestern Pipeline Corporation | P.O. Box 2521, Houston, Texas 77252 | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. Twp. Rge. |
| | | Is gas actually connected? When |
| | | No Yes 7/1/83 9-2-83 |

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

I. COMPLETION DATA

| | | | | | | | | |
|--|-----------------------------|-----------------|--------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| | | X | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | | | |
| 5/20/83 | 6/13/83 | 4200' | 4150' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | | | | | |
| 3837 3848 G.L. | Abo | 3615' | 3730' | | | | | |
| Perforations | Depth Casing Shoe | | | | | | | |
| 3796, 98, 3800, 02, 04, 3820, 22, 24, 26, 27, 3985, 87, 89, 91, 93, 95, 97 | 4150' | | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 16" | 13-3/8" | 40' | 5 yards | | | | | |
| 12-1/4" | 8-5/8" | 987' | 550 sx | | | | | |
| 7-7/8" | 4-1/2" | 4150' | 400 sx | | | | | |
| | 2 3/8 | 3730 | | | | | | |

I. 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)

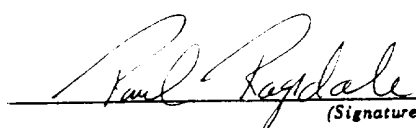
| | | | |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| | | | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| | | | |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |
| | | | |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| 6,000 | 4 hours | - | - |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| Back Pressure | 1000 | 1000 | Variable |

I. 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.


(Signature)
Operations Manager
(Title)
6/16/83
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1983, 19
BY Original Signed By
Leslie A. Clements
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 recompleted wells.

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.

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

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED BY

SEP 12 1983

O. C. D.
ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE September 8, 1983

This is to notify the Oil Conservation Division that connection for the
purchase of gas from the McClellan Oil Corp.
Operator

MOC, McClellan Fed.
Lease

#5 - Unit Letter Unknown
Well Unit

30-5S-25E, Chaves County
S.T.R.

Also Pecos Slope Also
Pool

Transwestern
Name of Purchaser

was made on September 2, 1983

Transwestern Pipeline Company
Company

Rodney C. Burke Rodney C. Burke
Representative

Jr. Analyst, Contract Administration
Title

cc: Operator
Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501