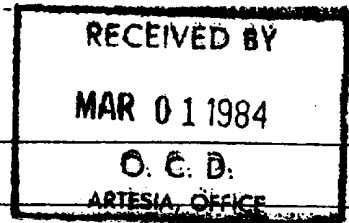


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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
TRANSPORTER	OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRORATION OFFICE	<input type="checkbox"/>

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-1
Effective 1-1-65

30-005-62015



Operator
CARL A. SCHELLINGER ✓
Address
P. O. Box 447, Roswell, NM 88201

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

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE **R-7708 10/25/84**

Lease Name Campbell Station Unit	Well No. 3	Pool Name, Including Formation Undesignated Pecos Slope Abo	Kind of Lease State, Federal or Fee	State State	Lease No. L-5347
Location Unit Letter H ; 1980 Feet From The North Line and 660 Feet From The East Line of Section 33 Township 8 South Range 27 East , NMPM, Chaves County					

III. 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 Company	P. O. Box 2521, Houston, Texas 77001	
If well produces oil or liquids, give location of tanks.	Unit Unit	Sec. Sec.
	Twp. Twp.	Rge. Rge.
	Is gas actually connected? Yes When 2/24/84	

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 7/8/83	Date Compl. Ready to Prod. 11/1/83	Total Depth 6700	P.B.T.D. 5500					
Elevations (DF, RKB, RT, CR, etc.) 3862GR, 3884KB	Name of Producing Formation ABO	Top Oil/Gas Pay 5148	Tubing Depth 5210					
Perforations 13 holes 5148-60, 3 holes 5191-95			Depth Casing Shoe -					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12"	8 5/8"	1400'	700 sx circulated					
7 7/8"	5 1/2"	6700'	520 sx					
	2 3/8"	5210'						

V. 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 allowable for this depth or be for full 24 hours)

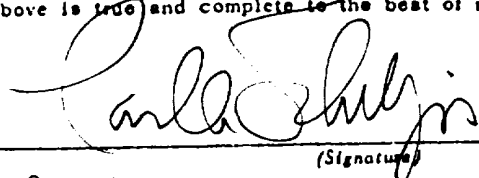
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 590 MCFD	Length of Test 1 hr.	Bbls. Condensate/MMCF 0	Gravity of Condensate -
Testing Method (pilot, back pr.) back pr.	Tubing Pressure (Shut-in) 956	Casing Pressure (Shut-in) 956	Choke Size 20/64

VI. 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)

Operator

(Title)

February 24, 1984

(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAR 05 1984**, 19____
Original Signed By
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.

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

RECEIVED BY

MAR 01 1984

O. C. D.

ARTESIA, OFFICE

NOTICE OF GAS CONNECTION

DATE February 28, 1984

This is to notify the Oil Conservation Division that connection for the
purchase of gas from the Carl A. Schellinger
Operator

Campbell Station Unit
Lease

^H
#3 - Unit Letter ~~Unknown~~
Well Unit

33-8S-27E, Chaves County
S.T.R.

Undesignated (Ade)
Pool

Transwestern was made on February 24, 1984
Name of Purchaser

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