| HO. OF COPIES PECEIVED | <u> </u> | | |
|---|---|---|---|
| DISTRIBUTION | OF CENTED BY | NSERVATION COMMISSION OR ALLOWABLE | Form C - 104 |
| SANTA FE | RECEIVE REQUEST | OR ALLOWABLE AND | Supersedes Old C-104 and C-11 Effective 1-1-65 |
| U.S.G.S. | ALITEMATE ALIMBICTO TRA | NSPORT OIL AND NATURAL | GAS |
| LAND OFFICE | AUT ON THE THINKS TO THE | NOT ONLY ONE MIND HAT OWNE | |
| [RANSPORTER OIL | O. C. D. | | |
| GAS | ARTESIA COTICE | | |
| PRORATION OFFICE | | | |
| Operator | | | |
| McClellan Oil Corpor | ation 🗸 | <u></u> | |
| Address 730 Do | | | |
| P. O. Drawer 730, Ro | | Other (Please explain) | |
| New Well XX | Change in Transporter of: | | |
| Recompletion | Oil Dry Ga | s | |
| Change in Ownership | Casinghead Gas Conden | sate | |
| If change of ownership give name | | | |
| and address of previous owner | | | |
| DESCRIPTION OF WELL ANI |) LEASE | | |
| Lease Name | Well No. Pool Nar | me, Including Formation | Kind of Lease |
| Tyrell Com. Fed. 5 | on: 2 Sout | th Pecos Slope - Abo | State, Federal or Fee Federal |
| Location | 1000 Nonth | 1000 | F |
| Unit Letter G; | 1980 Feet From The North Lin | e and 1980 Feet Fro | m The <u>Last</u> |
| Line of Section 13 | ownship 10 South Range 2 | 25 East , NMPM, Ch | 1aves County |
| | | 9. | , |
| | RTER OF OIL AND NATURAL GA | | |
| Name of Authorized Transporter of C | Oil or Condensate | Address (Give address to which app | proved copy of this form is to be sent) |
| Name of Authorized Transporter of C | casinghead Gas or Dry Gas [Y] | Address (Give address to which app | proved copy of this form is to be sent) |
| Transwestern Pipelin | e Company | P. O. Box 1188, Hous | ton. Tx. 77001 |
| If well produces oil or liquids, | Unit Sec. Twp. Rge. | Is gas actually connected? | When |
| give location of tanks. | | No. You | |
| | with that from any other lease or pool, | give commingling order number: | |
| COMPLETION DATA | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Res'v. Diff. Res'v |
| Designate Type of Comple | xion - (X) | X | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| 11-29-84 | 12-19-84 | 4690 ' | 4562' |
| South Pecos Slope | Name of Producing Formation Abo | Top Oil/Gas Pay | Tubing Depth |
| Perforations | 1 ADO | 4257' | 4183 Depth Casing Shoe |
| 4257-60; 4271-75; 43 | 75-77. | | 4562' |
| | 1 | CEMENTING RECORD | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 12-1/4" 7-7/8" | 8-5/8" 4-1/2" | 9001 | 550 sx |
| 1-778 | 2-3/8" | 4562 ' 4183 ' | 380 sx |
| | | 4103 | |
| TEST DATA AND REQUEST | | fter recovery of total volume of load c | oil and must be equal to or exceed top allow |
| OIL WELL Date First New Oil Run To Tanks | able for this de | pth or be for full 24 hours) | |
| one i noi new on han to tunks | 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 |
| 1275' | 4 hours | | Gravity of Condensate |
| Back Pressure | Tubing Pressure | Casing Pressure | Choke Size |
| L | 385 | 505 | 3/4" |
| CERTIFICATE OF COMPLIA | NCE | OIL CONSERV | VATION COMMISSION |
| I herehu pastifu that the | Leagulations of the Ott O | APPROVED FEB | 1 3 1985 , 19 |
| Commission have been complied | regulations of the Oil Conservation with and that the information given | | |
| above is true and complete to t | he best of my knowledge and belief, | | Signed By |
| \sim | | TITLE Leslie A. Clements Supervisor District II | |
| //1// | 1 1 1 | This form is to be filed by | n compliance with RULE 1104. |
| Mand Ya: | Male | If this is a request for all | lowable for a newly drilled or deepene |
| (Signature) | | well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. | |
| Operations Manager (Title) | | All sections of this form must be filled out completely for allow- | |
| • | i we | able on new and recompleted | wells. |
| 1-09-85 | Date) | | III, and VI only for changes of owner orter, or other such change of condition |
| | | | ust be filed for each pool in multipl |
| | | completed wells. | |