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

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

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SEP 03 '87

O. C. D.
ARTESIA, OFFICE

Operator
McClellan Oil Corporation ✓
Address
P.O. Drawer 730, Roswell, NM 88202

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"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
Penjack Fed.	3	Pecos Slope Abo	State, Federal or Fee Fed.
Location			
Unit Letter	H	1980 Feet From The North Line and 660 Feet From The East	
Line of Section	12	Township 10S Range 25E, NMPM, Chaves Co.	

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 Co.	P.O. Box 1188, Houston, TX 77251-1188
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	NO 9-25-87

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff.
		X	X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
7/29/87	8/31/87	4680'	4665'					
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Pecos Slope	Abo	4362'	4305'					
Perforations	Depth Casing Shoe							
4362,64,66,67,68,69,72,76,77	4665'							

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8-5/8"	910'	450 SX
7-7/8"	4 1/2"	4665'	300 SX

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

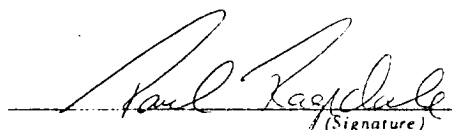
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
		Post ID-2 9-25-87 Comp & BK
Length of Test	Tubing Pressure	Casing Pressure
		Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1000	24 hours	-	-
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
back pressure	250	250	3/4"

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.


Operations Manager
(Title)
9/1/87
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 24 1987
Original Signed By
BY Les A. Gramments
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 deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for e able on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of o well name or number, or transporter, or other such change of cond

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