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

I.

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"/> 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name MM Federal	Well No. 9	Pool Name, including Formation Pecos Slope Abo	Kind of Lease State, Federal or Fee Federal
Location Unit Letter F ; 1980 Feet From The North Line and 1650 Feet From The West			
Line of Section 30 , Township 9-S Range 26-E , 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	P.O. Box 1188, Houston, TX 77251-1188
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When No Yes 12-12-88

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. Res'v
		X	X					
Date Spudded 4/20/88	Date Compl. Ready to Prod. 5/23/88	Total Depth 4620'	P.B.T.D. 4577'					
Pool Pecos Slope	Name of Producing Formation Abo	Top Oil/Gas Pay 4054'	Tubing Depth 4557'					
Perforations 4080' - 4312'			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	14"	80'	100 sx					
12 1/4"	8-5/8"	858'	450 sx					
7-7/8"	4 1/2"	4557'	325 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 allowable for this depth or be for full 24 hours)

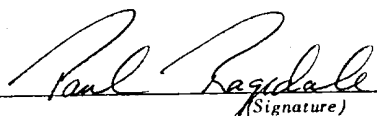
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 1629	Length of Test 4 hours	Bbls. Condensate/MMCF -	Gravity of Condensate -
Testing Method (pitot, back pr.) back pressure	Tubing Pressure 158	Casing Pressure 355	Choke Size 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.

  
(Signature)

Operations Manager  
(Title)

6/1/88  
(Date)

OIL CONSERVATION COMMISSION

APPROVED  , 19

BY 

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepene 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 allow able on new and recompleted wells.

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

Separate Forms C-104 must be filed for each pool in multipl

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OIL CONSERVATION DIVISION

DEC 30 '88

**Hobbs**  
P.O. Box 1980  
Hobbs, NM 88240

**Artesia**  
P.O. Drawer DD  
Artesia, NM 88210

O. C. D.  
ARTESIA, OFFICE  
**Artec**  
1600 Rio Brazos  
Aztec, NM 87410

NOTICE OF GAS WELL - CONNECTION / RECONNECTION / DISCONNECTION

This is to notify the Oil Conservation Division of the following:

Connection	<u>X</u>	First Delivery	<u>12-12-88</u>	<u>500 M MC 70</u>
		Date		Initial Potential
Reconnection	<u>      </u>	First Delivery	<u>      </u>	<u>      </u>
		Date		Initial Potential
Disconnection	<u>      </u>			

for delivery of gas from the McClellan Oil Co.  
Operator

MM Fed. ~~Inc.~~  
Lease

<u>15521</u>	<u>      </u>	<u>#9</u>	<u>F</u>	<u>30-95-26E</u>
Meter Code	Site Code	Well No.	Unit Letter	S-T-R
		<u>50. Pecos Slope / abo</u>		
		Pool		

was made on 12-12-88  
date

AOF

Choke

OCD use only	
County	<u>Chavez</u>
Land Type	<u>fed.</u>
Liq. Transporter	<u>      </u>

TRANSWESTERN PIPELINE CORP.

Transporter

PATRICIA CREIGHTON  
SR. CONTRACT ADMINISTRATOR  
Representative Name/Title  
(Please type or print)

Patricia Creighton  
Representative Signature

Submit in duplicate to the appropriate district office.

Contract Management

DEC 30 1988

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