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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION 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-105
Effective 1-1-65

AUG 15 2 53 AM '69

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AUG 14 1969

Operator
JACK L. McCLELLAN

Address
P. O. Box 848, Roswell, New Mexico, 88201

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

DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No.	Pool Name, including Formation	Kind of Lease
MARION FEDERAL	1	WILDCAT SAN ANDRES	State, Federal or Fee FEDERAL
Location			
Unit Letter	330'	Feet From The NORTH Line and 1650	Feet From The WEST
Line of Section	7	Township 15-S	Range 30-E, NMPM, CHAVES County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
THE PERMIAN CORPORATION	Box 3119, MIDLAND, TEXAS 79701		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
NONE			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp. Rge.
	7	15	30
Is gas actually connected?		When	

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

COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well
XX			XX
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
6/6/69	6/24/69	3525'	3486'
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
WILDCAT	SAN ANDRES	3373' & 3432'	3300'
Perforations	Depth Casing Shoe		
1 SHOT/FT. 3432-3438' & 1 SHOT/FT. 3373, 74, 76, 77, 81, 82, 83	3520'		
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8-5/8"	310'	200
7-7/8"	5 1/2"	3522'	175
	2-3/8"	3300'	NONE

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.)	
8/1/69	8/1/69	PUMPING	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 HOURS	0	50	2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
105	30	75	TSTM

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

Jack L. McClellan
(Signature)
OPERATOR
(Title)
JULY 8, 1969
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY James L. Jones
SILVER STATE DISTRICT #

TITLE _____

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 deviate 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 Sections I, II, III, and VI only 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 each completed well.