DISTRIBUTION ANTA I C ILC J.S.G.S. AND OFFICE RANSPORTER OIL GAS DPERATOR

SEPTEMBER I.

(linte)

REQUEST FOR ALLOWABLE AND

Tonn C+104 Supercedes Old C+104 and C+11 Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED MAY 1 9 1977 PRORATION OFFICE rerator McCLELLAN OIL CORPORATION O. C. C. ARTEBIA, OFFICE ddress Box 848 - Roswell, New Mexico 88201 leason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: lew Well Oil Dry Gas lecompletion Condensate Thange in Ownership XCasinghead Gas JACK L. McClellan - Box 848 - Roswell, New Mexico 88201 change of ownership give name d address of previous owner ESCRIPTION OF WELL AND LEASE Well No. : Pool Name, Including Formation FEDERAL DOUBLE L - QUEEN State, Federal or Fee 01998: SUE FEDERAL #1 NMI ecation 660 Feet From The_____S 1650 , N Feet From The Unit Letter 6 15S 30E CHAVES . NMPM. County Township Range Line of Section ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil [X] ARTESIA, NEW MEXICO 88210 NAVAJO REFINING CO. - PIPELINE DIVISION Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Castnghead Gas [X] or Dry Gas BARTLESVILLE, OKLAHOMA 74003 PHILLIPS PETROLEUM COMPANY Is gas actually connected? Twp. Poe. Unit f well produces oil or liquids, 6. MARCH N 15S | 30E YES give location of tanks. this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Plug Back Same Res'y, Diff. Res' Gas Well Workover Oil Well Designate Type of Completion -(X)P.B.T.D. Total Depth Date Spudded Date Compl. Ready to Prod. Tubing Depth Top Oil/Gas Pay Name of Producing Formation Lievations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top all able for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bble. Oil-Bbls. Actual Prod. During Test GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Choke Sixe Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION CERTIFICATE OF COMPLIANCE 1972 APPROVED hereby certify that the rules and regulations of the Oil Conservation Orio Signed by Commission have been complied with and that the information given above is true and complete to the beat of my knowledge and belief. Joe D. Raraci Dist. I, Supv. This form is to be filed in compliance with RULE 1104. a Ow Hoston If this is a request for allowable for a newly drilled or deeped well, this form must be accompanied by a tabulation of the device, toots taken on the well in accordance with RULE 111. PRODUCTION SUPERINTENDENT All sections of this form must be filled out completely for all, able on new and recompleted wells.

Fill out only Sections I. H. III, and VI for changes of ownwell name or number, or transporter, or other such change of conditi

Forms C-104 haust be filed for each pool in undi