

OF ORDER RECEIVED
DISTRIBUTION
TABLE
G.S.
ID OFFICE
TRANSPORTER
ERATOR
ORATION OFFICE
ator

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

Form C-104
Supersedes Old C-101 and C-1
Effective 1-1-65

RECEIVED

MAY 9 1977

rk Royalty Co.
O. C. C.
ARTESIA, OFFICE

0 Oil & Gas Bldg., Wichita Falls, Tx 76301

ison(s) for filing (Check proper box)
Well ☐
completion ☐
ange in Ownership ☒
Change in Transporter of ☐
Oil ☐
Casinghead Gas ☐
Dry Gas ☐
Condensate ☐

Other (Please explain)
for Joe G. Gressett
Effective 4/1/77

change of ownership give name
J address of previous owner McClellan Oil Corp., Box 848, Roswell, New Mexico 88201

DESCRIPTION OF WELL AND LEASE
Lease Name
Double L Queen Unit-Tract 7
Well No. 2
Pool Name, Including Formation Double L Queen Associated
Kind of Lease
State, Federal or Fee NM-0199827-A
Lease No.
Unit Letter K
2310 Feet From The S Line and 1650 Feet From The W
Line of Section 6 Township 15-S Range 30-E, NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Refining Co. - Pipeline Division
Address (Give address to which approved copy of this form is to be sent) Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Phillips Petroleum Co.
Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma
If well produces oil or liquids, give location of tanks.
Unit N Sec. 6 Twp. 15-S Rge. 30-E
Is gas actually connected? Yes When 3/71

COMPLETION DATA
Designate Type of Completion - (X)
Date Spudded
Date Compl. Ready to Prod.
Total Depth
P.B.T.D.
Elevations (D.F., RKB, RT, GR, etc.)
Name of Producing Formation
Top Oil/Gas Pay
Tubing Depth
Perforations
Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE
CASING & TUBING SIZE
DEPTH SET
SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL
(Test must be after recovery of total volume of lead 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
Length of Test
Bbls. Condensate/MMCF
Gravity of Condensate
Testing Method (flow, back pr.)
Tubing Pressure (shut-in)
Casing Pressure (shut-in)
Choke Size

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.
Bill Hacker
Agent
5/6/77

OIL CONSERVATION COMMISSION
MAY 24 1977
APPROVED
BY W. A. Gressett
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 deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All portions of this form must be filled out completely for allowable on new and re-completed wells.
Fill out only portions I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of conditions.