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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

APR 16 1971

Operator JACK L. MCGLELLAN /		O. C. C. ARTESIA, OFFICE
Address Post Office Box 848, ROSWELL, NEW MEXICO, 88201		
Reason(s) for filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input checked="" type="checkbox"/>		Other (Please explain) CHANGE IN OWNERSHIP EFFECTIVE APRIL 1, 1971, AT 7:00 A. M.
Change in Transporter of: Oil <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 AMOCO PRODUCTION COMPANY, Box 1410, FT. WORTH, TEXAS, 76101

II. DESCRIPTION OF WELL AND LEASE

Lease Name SMERNOFF FEDERAL	Well No. 1	Pool Name, including Formation SULIMAR QUEEN	Kind of Lease State, Federal or Fee FEDERAL	Lease No. NM-055 8684
Location Unit Letter B ; 330 Feet From The NORTH Line and 1650 Feet From The EAST Line of Section 24 Township 15-SOUTH Range 29-EAST, NMPM, CHAVES County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> NAVAJO REFINING CO., PIPELINE DIVISION	Address (Give address to which approved copy of this form is to be sent) N. FREEMAN AVE., ARTESIA, N. M. 88210			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PETROLEUM COMPANY	Address (Give address to which approved copy of this form is to be sent) BARTLESVILLE, OKLAHOMA 74003			
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 24	Twp. 15S	Rge. 29E
Is gas actually connected?		When		

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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, 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			

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)

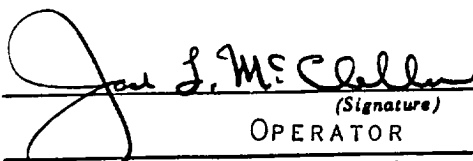
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

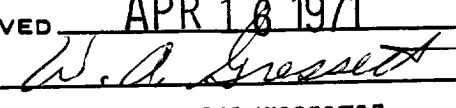
GAS WELL

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

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.


OPERATOR
APRIL 14, 1971
(Date)

OIL CONSERVATION COMMISSION
APPROVED APR 16 1971, 19
BY 
TITLE OIL AND GAS INSPECTOR

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 sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI 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 multiply completed wells.