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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORTED AND NATURAL GAS  
**RECEIVED**  
SEP - 8 1972

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

Operator	McCLELLAN OIL CORPORATION		O.C.C.	ARTESIA, OFFICE	
Address	Box 848 - ROSWELL, NEW MEXICO 88210				
Reason(s) for filing (Check proper box)			Other (Please explain)		
New Well	<input type="checkbox"/>	Change in Transporter of:			
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>

If change of ownership give name and address of previous owner JACK L. McCLELLAN - Box 848 - ROSWELL, NEW MEXICO 88201

Lease Name		TRACT 1	Well No.	2	Pool Name, including Formation	SULIMAR QUEEN - <del>QUEEN</del>	Kind of Lease	FEDERAL	Lease No.	
SULIMAR QUEEN UNIT							State, Federal or Fee	LC	069280-A	
Location										
Unit Letter	F		1980	Feet From The	N	Line and	1980	Feet From The	W	
Line of Section	24	Township	15 SOUTH	Range	29 EAST		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)					
NAVAJO REFINING CO.-PIPELINE DIVISION				ARTESIA, NEW MEXICO 88210					
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/>	or Dry Gas	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
PHILLIPS PETROLEUM COMPANY				BARTLESVILLE, OKLAHOMA 74003					
If well produces oil or liquids, give location of tanks.	Unit	F	Sec. 24	Twp. 15S	Rge. 29E	Is gas actually connected?	YES	When	2-18-71

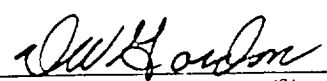
If this production is commingled with that from any other lease or pool, give commingling order number:

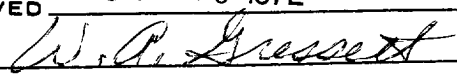
COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

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

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)  
PRODUCTION SUPERINTENDENT  
(Title)  
SEPTEMBER 1, 1972  
(Date)

OIL CONSERVATION COMMISSION  
SEP 13 1972  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY   
TITLE MINING 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