NO OF COMER MECESSES		1	
DISTRIBUTION			1
SANTALE		1	
FILE		,	*
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR			
PRORATION OFFICE			
Operator			

## NEW MEXICO OIL CONSCRVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-110

FILE	KEGOESI	AND	Effective 1-1-65		
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
LAND OFFICE	RE	CEIVED			
TRANSPORTER GAS !					
OPERATOR (	SE	IP - 8 1972			
PRORATION OFFICE Operator					
McCLELLAN OIL	LURPORALION	J. C. C. ESIA, OFFICE			
Address Box 818 - Dog	<del></del>				
Reason(s) for filing (Check proper box)	VELL, NEW MEXICO 882				
New Well	Change in Transporter of:	Other (Please explain	1)		
Swcompletion	Oil Dry Ga	s 🔲			
Change in Ownership X	Casinghead Gas Conden	sate			
If change of ownership give name	JACK L. MCCLELLAN -	Box 848 - ROSWEL	1 NEW MEXICO 88201		
and address of previous owner		TOOWEL	THE WIENT CO GOZOT		
DESCRIPTION OF WELL AND I					
Lease Name TRACT SULIMAR QUEEN UNIT	Well No. Pool Name, Including Fo		Federal or Fee LC 069280-A		
Location					
Unit Letter C; 660	O Feet From The N Line	e and 2310 Feet	From TheW		
	nship 15 South Range 29		· .		
Line of Section 24 Tow	nship 1) 30011 Range 29	EAST , NMPM,	CHAVES County		
DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S			
Name of Authorized Transporter of Oil NAVAJO REFINING CO		I .	approved copy of this form is to be sent)		
Name of Authorized Transporter of Cas		ARTESIA, NEW MEXICO 88210  Address (Give address to which approved copy of this form is to be sent)			
PHILLIPS PETROLEUM	<del></del>	BARTLESVILLE, OKLAHOMA 74003			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	When		
give location of tanks.	F 24 15S 29E	YES	2-18-71		
f this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order numbe	r:		
Designate Type of Completio	Oil Well Gas Well	New Well Workover Deep	pen Plug Back   Same Res'v. Diff. Res'v.		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Compil Moday to Frod.	Total Beptil	F.B.1.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
Perforations			Depth Casing Shoe		
			Depin sabing once		
	TUBING, CASING, AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		<u> </u>			
TEST DATA AND REQUEST FO		ter recovery of total volume of lo pth or be for full 24 hours)	ad oil and must be equal to or exceed top allow-		
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-Bhis.	Water-Bbls.	Gas-MCF		
CAS WELL					
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		
CEPTIFICATE OF COMPLIANC					
ERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION					
nervely certain that the fales and regarditions of the off competitation					
Commission have been complied wabove is true and complete to the	n have been complied with and that the information given rue and complete to the best of my knowledge and belief.		Gressett		
		TITLE OIL AND GAS INS			
1 W Boulon		If this is a request for	ed in compliance with RULE 1104, rallowable for a newly drilled or deepened		
(Signature) PRODUCTION SUPERINTENDENT		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.			
		All sections of this form must be filled out completely for allow-			
SEPTEMBER 1, 1972		able on new and recompleted wells.			

(Date)

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.

Second Forms C-104 must be filed for each pool is multiply