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

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

RECEIVED
MAY 5 1970
D. C. C.
ARTESIA, OFFICE

I. Operator
R. D. Collier
Address
Box 798 Artesia, New Mexico 88210
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name and address of previous owner **H. W. McClurg Box 763 Hobbs, N. M.**

II. DESCRIPTION OF WELL AND LEASE
Lease Name **Magnolia State** Well No. **1** Pool Name, Including Formation **Shugart** Kind of Lease **State** Lease No. **E-882**
Location
Unit Letter **E** ; **1980'** Feet From The **North** Line and **660'** Feet From The **West**
Line of Section **16** Township **18** Range **31** , NMPM, **Eddy** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Permian Corporation Address (Give address to which approved copy of this form is to be sent)
Box 3119 Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Continental Oil Co. Address (Give address to which approved copy of this form is to be sent)
Ponca City, Oklahoma
If well produces oil or liquids, give location of tanks. Unit **E** Sec. **16** Twp. **18** Rge. **31** Is gas actually connected? ☐ When

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

V. 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

VI. 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

VII. 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.
R. D. Collier (Signature)
By: Jimmy C. Collier (Title)
5-4-70 (Date)
OIL CONSERVATION COMMISSION
APPROVED **MAY 5 1970**, 19
BY **W. A. Gressett**
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.



LTR



Job separation sheet

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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator H. W. McClurg				Lease Magnolia State		Well No. 1
Unit Letter E	Section 16	Township 18 S	Range 31 E	County Eddy		
Pool North Singart-Queen-Crayburg				Kind of Lease (State, Fed, Fee) State		
If well produces oil or condensate give location of tanks		Unit Letter E	Section 16	Township 18 S	Range 31 E	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> The Permian Corporation				Address (give address to which approved copy of this form is to be sent) Box 3119, Midland, Texas		

Is Gas Actually Connected? Yes ☒ No ☐

Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/> Continental Oil Company	Date Connected 4/8/62	Address (give address to which approved copy of this form is to be sent) Box 427, Hobbs, New Mexico
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If gas is not being sold, give reasons and also explain its present disposition:

REASON(S) FOR FILING (please check proper box)

New Well ☐ Change in Ownership ☐
 Change in Transporter (check one) Other (explain below) ☒
 Oil ☐ Dry Gas ☐
 Casing head gas . ☐ Condensate.. ☐

To show casinghead gas connection.

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 29th day of May, 1962.

OIL CONSERVATION COMMISSION		By H. L. Smith
Approved by M. L. Armstrong	Title Agent	
Title OIL AND GAS INSPECTOR	Company H. W. McClurg	
Date JUN 5 1962	Address P.O. BOX 1000 & GAS SERVICES SANTA FE, NEW MEXICO	