

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

AUG 23 '90

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

ARTESIA OFFICE

erator	Well API No.
erit Energy Company	30-005-60858
dress	
2221 Merit Drive, Suite 1040, Dallas, TX 75251	
ason(s) for Filing (Check proper box)	<input type="checkbox"/> Other (Please explain)
W Well <input type="checkbox"/>	Change in Transporter of:
ompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
ange in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
hange of operator give name	
address of previous operator	McClellan Oil Corporation, 850 United Bank Plaza, Drawer 730, Roswell, NM 88202

DESCRIPTION OF WELL AND LEASE		Kind of Lease	Lease No.
ase Name	Well No.	State/Federal	
Coyote Draw Federal	1		NM-28036
ocation			
Unit Letter	L	1650 Feet From The South	Line and 660 Feet From The West
Section	6	Township	8S
Range	25E	NMPM	Chaves
County			

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil	<input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	P. O. Box 2436, Abilene, TX 79604	
Pride Pipeline			
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Transwestern Pipeline Co.		P. O. Box 1188, Houston, TX 77251-1188	
well produces oil or liquids,	Unit	Sec.	Twp.
location of tanks.			Rge.
			Is gas actually connected?
			Yes
			When?
			10-1-81

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

II. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion - (X)									
ate Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
evations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Drillations				Depth Casing Shoe					

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

III. 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.)			
ate First New Oil Run To Tank	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
			posted 10-3 8-31-90 Chg OP

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
Signature	Prod/Reg. Admin.
Sheryl J. Carruth	
Printed Name	Title
8-20-90	(214) 701-8377
Date	Telephone No.

OIL CONSERVATION DIVISION	
Date Approved	AUG 31 1990
By	ORIGINAL SIGNED BY
	MIKE WILLIAMS
Title	SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.