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Form C-104 **MAR - 4 1982**  
Supersedes Old C-104 and C-110  
Effective 1-1-85

**O. C. D.**  
**ARTESIA OFFICE**

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

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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	/
OPERATOR		/
PRORATION OFFICE		

Operator <b>McClellan Oil Corporation</b>	
Address <b>P. O. Drawer 730, Roswell, New Mexico 88202</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
from Coyote Draw Federal No. 4 to Coyote Federal No. 2	

If change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE			
Lease Name <b>Coyote Federal</b>	Well No. <b>2</b>	Pool Name, Including Formation <b>Undesignated Abo</b>	Kind of Lease State, Federal or Fee <b>Federal</b>
Location			Lease No. <b>NM-16069</b>
Unit Letter <b>B</b>	<b>660</b> Feet From The <b>North</b> Line and <b>1980</b> Feet From The <b>East</b>		
Line of Section <b>12</b>	Township <b>8-S</b>	Range <b>24-E</b>	County <b>Chaves</b>

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
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)		
<b>Transwestern Pipeline Company</b>	<b>P. O. Box 2521, Houston, Texas 77001</b>		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Rge.
Is gas actually connected?	When		
<b>Yes</b>	<b>1-23-82</b>		

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

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.

*Judy Johnstone*  
(Signature)

Production Clerk

(Title)

3/03/82

(Date)

OIL CONSERVATION COMMISSION

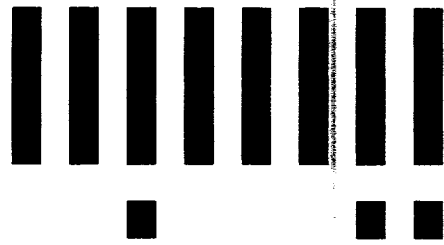
**MAR - 8 1982**

APPROVED \_\_\_\_\_

BY *W.A. Gressett*

TITLE **SUPERVISOR, DISTRICT II**

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



**LTR**



**Job separation sheet**

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

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Effective 1-1-65

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DEC 10 1981

O. C. D.

ARTESIA, OFFICE

Operator McClellan Oil Corporation	
Address P. O. Drawer 730, Roswell, New Mexico 88202	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE				
Lease Name Coyote Draw	Well No. 4	Pool Name, including Formation <del>Wildcat</del> Abo	Kind of Lease State, Federal or Fee Federal	Lease No. NM-16069
Location				
Unit Letter B	660	Feet From The North	Line and 1980	Feet From The East
Line of Section 12	Township 8-S	Range 24-E	NMPM, Chaves	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
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 Company	P. O. Box 2521, Houston, Texas 77001	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? When 1-23-82

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.
		X	X					
Date Spudded 9/19/81	Date Compl. Ready to Prod. 12/07/81	Total Depth 3900'	P.B.T.D. 3884'					
Elevations (DF, RKB, RT, GR, etc.) 3650' G.L.	Name of Producing Formation Abo	Top Oil/Gas Pay 3369'	Tubing Depth 3660'					
Perforations 3514-3595'	3652-3691'	Depth Casing Shoe 3900'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8"	454'	550 sx "C"					
12-1/4"	8-5/8"	1395'	600 sx "C"					
7-7/8"	4-1/2"	3900'	230 sx Poz					


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

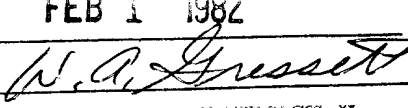
GAS WELL			
Actual Prod. Test-MCF/D 300	Length of Test 4 hours	Bbls. Condensate/MMCF N/A	Gravity of Condensate N/A
Testing Method (pitot, back pr.) 4-Point	Tubing Pressure (Shut-in) 895	Casing Pressure (Shut-in) 895	Choke Size Variable

I. 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.

  
Engineer  
(Title)  
12/08/81  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 1 1982  
BY   
SUPERVISOR, DISTRICT II

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JAN 29 1982

O. C. D.  
ARTESIA, OFFICE

NEW MEXICO OIL CONSERVATION DIVISION

P. O. DRAWER "DD"

ARTESIA, NEW MEXICO 88210

NOTICE OF GAS CONNECTION

DATE January 27, 1982

This is to notify the Oil Conservation Division that connection for the  
purchase of gas from the McClellan Oil Corp.  
Operator

Coyote Draw-Federal  
Lease

Well #4-Unit Letter <sup>B</sup> Unknown  
Well Unit

12-8S-24E, Chaves County  
S.T.R.

~~Wildcat~~ (Abo)  
Pool

Transwestern  
Name of purchaser

was made on January 23, 1982

Transwestern Pipeline Company  
Company

 H. N. Aicklen  
Representative

Supervisor Gas Purchase Contract Administration  
Title

cc: Operator  
Oil Conservation Division - Santa Fe