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	GAS	
OPERATOR		✓
PRORATION OFFICE		

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

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MAR 09 '88

Effective 8/87

I. Operator **NERCO OIL & GAS, INC.** ☒ **O. C. D.**
ARTESIA, OFFICE

Address
8100 N.E. PARKWAY DRIVE, VANCOUVER, WA. 98662

Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☐ Change in Transporter of: ☐ **CHANGE OF NAME AND ADDRESS**
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner **CLEMENTS ENERGY, INC. 1746 COLE BLVD, SUITE 300, GOLDEN, CO. 90401**

II. DESCRIPTION OF WELL AND LEASE

Lease Name NM 36 STATE	Well No. 1	Pool Name, including Formation HAGERMAN STRAWN WILDCAT (MORROW)	Kind of Lease State, Federal or Fee STATE	Lease No.
Location Unit Letter F ; 1980' Feet From The NORTH Line and 1980' Feet From The WEST Line of Section 36 Township 13S Range 26E , NMPM, CHAVES County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> SHUT IN	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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? When	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X						
Date Spudded 12-27-81	Date Compl. Ready to Prod. 2-17-82	Total Depth 6918'	P.B.T.D. 6846'					
Elevations (DF, RKB, RT, GR, etc.) GR3453.4	Name of Producing Formation MORROW	Top Oil/Gas Pay	Tubing Depth 6495'					
Perforations		Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17 1/2"	13 3/8"	385'	360 sx Class "C", 2% CC					
8 5/8"	12 1/4"	1625'	450 sx HLC, 2%CC, 495 s					
			Class "C", 2 % CC					
4 1/2"	7 7/8"	7 7/8"	475 sx HLC					

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.) Post FD-2	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size camp & BK
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 753.2	Length of Test 4 Hours	Bbls. Condensate/MMCF -0-	Gravity of Condensate
Testing Method (pitot, back pr.) FLOWING	Tubing Pressure (shut-in) 300 psi	Casing Pressure (shut-in) -0-	Choke Size .500

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 Saleg
(Signature)

Production Tech.

(Title)

2-29-88

(Date)

OIL CONSERVATION COMMISSION

MAR 30 1988

APPROVED _____, 19

Original Signed By
Mike Williams

BY _____
Oil & Gas Inspector

TITLE _____

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 deviate 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 conditions.
Separate Forms C-104 must be filed for each pool in multiple completed wells.