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| LAND OFFICE | |
| TRANSPORTER | OIL GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

NEW MEXICO OIL CONSERVATION COMMISSION

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

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O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
 McClellan Oil Corporation
 Address
 P.O. Drawer 730, Roswell, NM 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

II. DESCRIPTION OF WELL AND LEASE

Little Lucky Lake

| | | | |
|---|---------------|--|--|
| Lease Name Champeau MOC Federal | Well No. 1 | Pool Name, including Formation Morrow | Kind of Lease State, Federal or Fee Federal |
| Location Unit Letter <u>C</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>31</u> , Township <u>15S</u> Range <u>30E</u> , NMPM, <u>Chaves</u> Co. | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Navajo Refining Corporation | P.O. Drawer 159, Artesia, NM 88210 |
| 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) |
| Cabot Pipeline Corporation | P.O. Box 1473, Charleston, WV 25325 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. Is gas actually connected? When |
| C 31 15S 30E | Yes 11-04-85 |

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. |
| | | XX | XX | | | | |
| Date Spudded 3-27-85 (re-entry) | Date Compl. Ready to Prod. 4-29-85 | Total Depth 10,030' | P.B.T.D. 10,030' | | | | |
| Pool Double L South | Name of Producing Formation Morrow | Top Oil/Gas Pay 9,890' | Tubing Depth 9,818' | | | | |
| Perforations 9,894'-9,901' | Depth Casing Shoe 10,030' | | | | | | |
| 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 able 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 500 MCF/D | Length of Test 24 hrs | Bbls. Condensate/MMCF 50 | Gravity of Condensate 51 |
| Testing Method (pitot, back pr.) Back Pressure | Tubing Pressure 350 | Casing Pressure 780 | Choke Size 14/64" |

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.

Paul Ragsdale
(Signature)

Operations Manager
(Title)

November 12, 1985
(Date)

OIL CONSERVATION COMMISSION
NOV 19 1985
 APPROVED _____, 19____
 BY Eddie W. Sotby
 TITLE Oil & 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 deep well, this form must be accompanied by a tabulation of the dev tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for a able on new and recompleted wells.
 Fill out Sections I, II, III, and VI only for changes of well name or number, or transporter, or other such change of condi
 Separate Forms C-104 must be filed for each pool in mul completed wells.

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