

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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

McClellan Oil Corporation		
P.O. Drawer 730, Roswell, NM 88201		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	Approval to flare casinghead gas from this well must be obtained from the Minerals Management Service.
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	Well No.	Pool Name, Including Formation	Kind of Lease
McClellan "A" Fed.	2	Wildcat, Bough C	State, Federal or Fee Federal
Location			
Unit Letter	H	1980 Feet From The	North Line and 660 Feet From The East
Line of Section	27	Township	15-S Range 30-E, NMPM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Refining Co.	P.O. Drawer 159, Artesia, NM 88210					
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)					
Cabot Corporation	7120 I-40 West, Amarillo, TX 79106					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	H	27	15S	30E	No	

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
1/17/84	3/5/84	11,100'	10,212'
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Unnamed New Discovery	Bough "C"	9070'	8992'
Perforations	Depth Casing Shoe		
9088,90,93,94,96	10,212'		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	507'	525 sx
12-1/4"	8-5/8"	3299'	1250 sx
7-7/8"	5-1/2"	11,100'	625 sx

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)

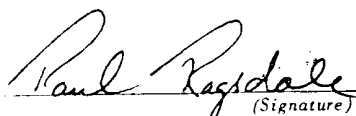
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
3/3/84	3/4/84	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	165	N/A	3/4
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	353	35	244.6

GAS WELL

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

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.

  
(Signature)

Operations Manager  
(Title)

3/12/84  
(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAR 30 1984**, 19 \_\_\_\_\_  
BY **ORIGINAL SIGNED BY JERRY SEXTON**  
**DISTRICT 1 SUPERVISOR**  
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 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 Sections I, II, III, and VI only 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.

RECEIVED BY  
MAR 15 1984  
RECEIVED.  
O.  
MAR 19 1984  
ARTESIA, OFFICE  
O.C.D.  
HOBBES OFFICE

LESLIE K. EVERTSON - ROSWELL  
KENNETH D. REYNOLDS - ARTESIA

WEK

DRILLING CO., INC. - OIL WELL DRILLING CONTRACTORS

P. O. Box 1498 ROSWELL, NEW MEXICO 88201  
TELEPHONES: ARTESIA 505/746-6757  
ROSWELL 505/623-5070

February 28, 1984

McClellan Oil Corp.  
PO Drawer 730  
Roswell, NM 88201

Ref: McClellan "A" Fed. #2, 1980' FNL & 660' FEL, Sec. 27-T15S-R30E

Gentlemen:

The following is a Deviation Survey on the above well located in Chaves County, New Mexico.

376' - 1°	4300' - 1/2°	7963' - 2°
505' - 1°	4726' - 3/4°	8460' - 1 3/4°
785' - 3/4°	4811' - 3/4°	8960' - 1 3/4°
1046' - 3/4°	5300' - 1°	9109' - 1/2°
1429' - 3/4°	5800' - 1°	9367' - 1/2°
1925' - 3/4°	6083' - 1°	9655' - 1/2°
2400' - 1°	6312' - 1°	10,108' - 1/2°
2898' - 1°	6753' - 1°	10,464' - 1/2°
3040' - 1°	6914' - 1°	10,645' - 3/4°
3300' - 3/4°	7296' - 1°	11,100' - 2 1/4° T.D.
3800' - 1/2°	7673' - 1 1/4°	

Yours very truly,

WEK DRILLING CO., INC.

*Arnold Newkirk*

Arnold Newkirk

STATE OF NEW MEXICO)  
COUNTY OF CHAVES )

The foregoing was acknowledged before me this 28<sup>TH</sup> day  
of FEBRUARY 1984 by Arnold Newkirk.

MY COMMISSION EXPIRES:

5-4-87

*Bridgette Michelle Betancur*  
Notary Public

RECEIVED  
MAR 27 1984  
O.C.D.  
HOBBS OFFICE