NO. OF COPIES RECEIVED				· (		
DISTRIBUTION		EW MEXICO OU	CONSERVATION COMMISSI	CIN Callo	1	
SANTA FE			T FOR ALLOWABLE	Supersedes	Form C-104 Supersedes Old C-104 and C-1	
FILE			AND	Effective 1	-1-65	
U.S.G.S.	AUTHORI	ZATION TO TR	RANSPORT OIL AND NAT	TURAL GAS		
TRANSPORTER GAS						
OPERATOR	1					
PRORATION OFFICE						
McAlester Fu	el Company					
P. 0. Box 10	, Magnolia, A	rkansas 717	<b>'</b> 53			
Reason(s) for filing (Check proper bo	<u> </u>		Other (Please exp	plain)		
New Well	Change in Tr					
Hecompletion Change in Cwnership	001 Desinghead S	las <b>K</b> Cond	densate			
f change of ownership give name						
ond address of previous owner						
DESCRIPTION OF WELL AND		Name, Including Formation enton, Devonian	Kind of Lease State, Federal or F	Kind of Lease State, Federal or Fee <b>Fee</b>		
Pat H. McClure "C" Location "A"	220		-	Toat		
Onic Letter	330 Feet From T	ne NOPCH L		eet From The		
Line of Section 14 , T	ownship 15 S	Hange	37 E , NMPM,	Lea	County	
Name of Authorized Transporter of C Name of Authorized Transporter of C Tipperary Resources C	asinghead 345	ensate	Address (Give address to w	hich approved copy of this form  hich approved copy of this form  St., Midland, Texas	is to be sent)	
If well produces oil or liquids,	Unit Sec.	Twp. Rge.	Is gas actually connected?	When	070	
f this production is commingled w	A 14	158 37E	Yes	May 1, 1	910	
COMPLETION DATA	Oi V				Res'v. Diff. Res'	
Designate Type of Complet		ret   Lads Well	New Well Worksver	Print ndck Same	nes-v. Dill. Nes-	
Date Spudded	Date Compl. Read	ly to Frod.	Total Depth	P.3.T.D.		
			T. 60 (Grap Day)	Tubing Depth		
Feel	Name of Producing Formation		Top Oil/Gas Pay	Tabing Depth		
Perforations				Depth Casing Shoo	9	
	T.I.I.	THE CASING A	ND CENENTING DECORD			
HOLE SIZE		TUBING SIZE	DEPTH SET	SACKS	CEMENT	
TEST DATA AND REQUEST	FOR ALLOWABL		e after recovery of total volume depth or be for full 24 hours)	of load oil and must be equal to	or exceed top allo	
OIL WELL  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	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	Bbls. Condensate/MMCF Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure		Casing Pressure	Casing Pressure Choke Size		
	<u> </u>			NCED (ATION COMMIS		
CERTIFICATE OF COMPLIA	NCE		14		SION	
I hereby certify that the rules and Commission have been complied	d regulations of the	e Oil Conservation give	n APPROVED JU	NSERVATION COMMIS	SION , 19	

## VI

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above is true and complete to the best of my knowledge and belief.

Chief Engineer

June 22, 1970

(Title)

(Date)

This form is to be filed in compliance with RULE 1104.

SUPERVISOR DISTAIC

TITLE

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.

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JUNI 2 / 1970

OIL CONSERVATION COUM.