

REGISTRATION	
AREA	
OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION 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-11
Effective 1-1-65

Shell Oil Company

P. O. Box 1509, Midland, Texas 79701

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of:
Recompletion ☒	Oil ☐ Dry Gas ☐
Change in Ownership ☐	Casinghead Gas ☐ Condensate ☐

Change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE	
Lease Name	Well No.
McKinley A	11
Pool Name, Including Formation	Kind of Lease
Hobbs (G-SA)	State, Federal or Fee
Fee	Lease No.
Location	
Unit Letter	420
Feet From The	South
Line and	1980
Feet From The	West
Line of Section	19
Township	18S
Range	38E
NMPM	Lea
County	

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Shell Pipe Line Corp.	P. O. Box 1910, Midland, Texas 79701
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	Phillips Building, Odessa, Texas 79760
If well produces oil or liquids, give location of tanks.	Unit
	N
	19
	18S
	38E
Is gas actually connected?	When
Yes	

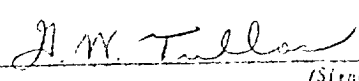
If this production is commingled with that from any other lease or pool, give commingling order number:

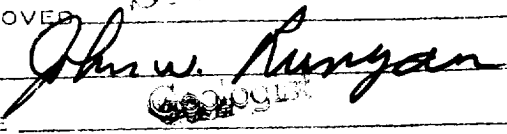
COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well
	X
Date Spudded	Date Compl. Ready to Prod.
	7-1-76
Revolutions (DF, RKB, RT, GR, etc.)	Name of Producing Formation
3666 DF	San Andres
Perforations	Total Depth
4192-4197'	7105
	Top Oil/Gas Pay
	4192
	Tubing Depth
	4296
	Depth Casing Shoe
	7103

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	360'	360
12 1/4"	9 5/8"	3794'	500
8 3/4"	5 1/2"	3537-7103	950

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.)	
7-1-76	7-3-76	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	20	14	126

GAS WELL			
Action Pres. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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.	
	G. W. Tullos
(Signature)	
Senior Production Engineer	
(Title)	
7-3-76	
(Date)	

OIL CONSERVATION COMMISSION	
APPROVED	19
BY	
TITLE	Geologist
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 newly completed wells.	
Fill out only sections I, II, III, and IV for change of permit, well name or number, or transportation or other such change of condition.	