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LAND OFFICE	
TRANSPORTER	OIL 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

Operator PETROLEUM DEVELOPMENT CORPORATION	
Address 9720 B Candelaria NE, Albuquerque, New Mexico 87111	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	New formation. Updated test data and request for allowable oil well.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner

THIS WELL IS TO BE PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR, NOTIFY THIS OFFICE.

R-5987

II. DESCRIPTION OF WELL AND LEASE

Lease Name McKay West Federal	Well No. 1	Pool Name, Including Formation Undesign. Bone Spring	Kind of Lease State, Federal or Fee Federal
Location Unit Letter F ; 1980 Feet From The north Line and 1980 Feet From The west Line of Section 34 , Township 18 South Range 32 East , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation Permian (Eff. 9 / 1 / 87)	Address (Give address to which approved copy of this form is to be sent) Box 838, Hobbs, NM 88240		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Corp. GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 100 Pioneer Building, Bartlesville, Ok. 74004		
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 34	Range 18S 32E
			When 8/77

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v.	Diff. Res'v.
Date Spudded 1/31/75	Date Compl. Ready to Prod. 7/11/75	Total Depth 13,090	P.B.T.D. 12,521					
Pool Undes. Bone Spring	Name of Producing Formation Bone Spring	Top Oil/Gas Pay 8788'	Tubing Depth 9900'					
Perforations Bone Spring Perfs: 8788-97; 9180-9204; 9220-30; 9886-9902.							Depth Casing Shoe 13,049	
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17½	13-3/8		452		400			
12¼	9-5/8		4600		600			
8-3/4	7		13049		1200			
	2-3/8							

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 7/11/75	Date of Test 1/4/79	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure 20 psi	Choke Size
Actual Prod. During Test	Oil - Bbls. 220	Water - Bbls. 130	Gas - MCF 319

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

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.

Charles W. Sanders / cp
Charles W. Sanders (Signature)
Vice President (Title)
1/7/79 (Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 10 1979, 19
BY [Signature]
TITLE SUPERVISOR DISTRICT 1

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.