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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 O-104  
Supersedes Old O-104 and O-11  
Effective 1-1-65

I. **Transporter**  
Crown Central Petroleum Corporation  
**Address**  
4000 N. Big Spring, Suite 213, Midland, Texas 79705  
**Reason(s) for filing (Check proper box)**  
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐  
Recompletion ☐ Oil ☐ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☐  
**Other (Please explain)**  
Downhole commingled Drinkard and Blinebry  
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name McCallister	Well No. 2	Pool Name, including Formation West Nadine (Drinkard)	Kind of Lease Lease, Federal or Fee Fee
Location Unit Letter D ; 660 Feet From The North Line and 660 Feet From The West Line of Section 8 , Township 20S Range 38E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Koch Oil	Address (Give address to which approved copy of this form is to be sent) 1725 N. Grimes, Hobbs, New Mexico
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 67, Monument, New Mexico 88265
If well produces oil or liquids, give location of tanks. Unit M Sec. 5 Twp. 20S Rge. 38E	Is gas actually connected? When Yes November 2, 1982

If this production is commingled with that from any other lease or pool, give commingling order number: DHC-559

IV. 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. 6-16-85	Total Depth 7058	P.B.T.D. 7050
Pool West Nadine	Name of Producing Formation Drinkard	Top Oil/Gas Pay 6881	Tubing Depth 7005	Depth Casing Shoe
Perforations 6881-7022				

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	20	-
12-1/4	8-5/8	1537	400
7-7/8	5-1/2	7058	1065
	2-3/8	7005	

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)

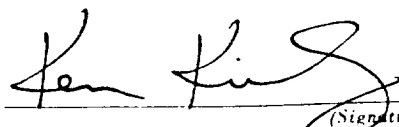
Date First New Oil Run To Tanks 6-16-85	Date of Test 8-11-85	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 120	Casing Pressure 35	Choke Size -
Actual Prod. During Test 30	Oil-Bbls. 19	Water-Bbls. 11	Gas-MCF 42

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.

  
(Signature)

K.K. Kirby

Petroleum Engineer

(Title)

December 2, 1985

(Date)

OIL CONSERVATION COMMISSION

APPROVED DEC 6 - 1985, 19

BY ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT 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 multiple

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DEC 5 - 1985

O.C.D.  
HOBBS OFFICE