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TRANSPORTER	OIL	
	GAS	
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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 Burleson & Huff	
Address 310 Central Bldg., Midland, Texas	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	To designate Skelly as gas purchaser.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	
Casinghead Gas <input checked="" type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name McAllister	Lease No. 11757	Well No. 1	Pool Name, Including Formation Tubb	Kind of Lease State, Federal or Fee Fee
Location				
Unit Letter E	1980	Feet From The North Line and 660	Feet From The West	
Line of Section 7	Township 22-S	Range 38-E	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"/>	Address (Give address to which approved copy of this form is to be sent)					
Permian Corp. (no change)						
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)					
Skelly	P.O. Box 1135, Eumice, N.M.					
If well produces oil or liquids, give location of tanks.	Unit E	Sec. 7	Twp. 22-S	Rge. 38-E	Is gas actually connected? Yes	When 10/31/66

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			xx					
Date Spudded 9/14/65	Date Compl. Ready to Prod. 9/27/65		Total Depth 7200'		P.B.T.D. 6800'			
Elevations (DF, RKB, RT, GR, etc.) 3342	Name of Producing Formation Tubb		Top Oil/Gas Pay 6221		Taking Depth 6247'			
Perforations 6221-30, 33, 44, 50, 93, 6300, 39, 56, 58					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12"	9-5/8"		1308		500 sx			
8-3/4" to 5571								
7-7/8"	4-1/2"		7192		800 sx			
	2"		6247					

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)

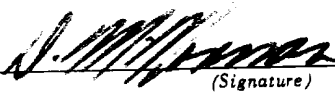
Date First New Oil Run To Tanks 10/28/65	Date of Test 10/29/65	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 150	Casing Pressure 1000	Choke Size 24/64
Actual Prod. During Test 74 bbls.	Oil-Bbls. 74	Water-Bbls. 0	Gas-MCF 111 MCF

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)
Agent
(Title)
10/31/66
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
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 only Sections I, II, III, and VI 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.

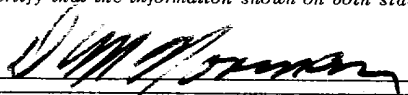
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NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

Nov 1 11 38 AM '65

Form C-105
Revised 1-1-65

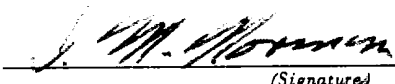
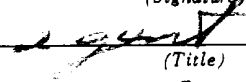
5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

1a. TYPE OF WELL				7. Unit Agreement Name							
b. TYPE OF COMPLETION				8. Farm or Lease Name							
NEW <input type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>				McCallister							
2. Name of Operator				9. Well No.							
Burleson & Huff				10. Field and Pool, or Wildcat							
3. Address of Operator				Tubb							
Box 935 Midland, Texas											
4. Location of Well				12. County							
UNIT LETTER E LOCATED 1980 FEET FROM THE north LINE AND 660 FEET FROM THE west LINE OF SEC. 7 TWP. 22-S RGE. 38-E NMPM				Lea							
15. Date Spudded		16. Date T.D. Reached		17. Date Compl. (Ready to Prod.)		18. Elevations (DF, RKB, RT, GR, etc.)		19. Elev. Casinghead			
9-14-65		10-2-65				3342 Gr.		3343			
20. Total Depth		21. Plug Back T.D.		22. If Multiple Compl., How Many		23. Intervals Drilled By		Rotary Tools			
7200		6800		No		All		Cable Tools			
24. Producing Interval(s), of this completion - Top, Bottom, Name								25. Was Directional Survey Made			
6221 - 6300-58 Tubb								No			
26. Type Electric and Other Logs Run								27. Was Well Cored			
Sonic log; Micro-lateral; Lateralog								No			
28. CASING RECORD (Report all strings set in well)											
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED	
9-5/8"				1308		12"		500 sx		None	
4-1/2"		11.60		7192		8-1/4 & 7-7/8		800 sx		None	
29. LINER RECORD										30. TUBING RECORD	
SIZE		TOP		BOTTOM		SACKS CEMENT		SCREEN		SIZE	
None										2	
31. Perforation Record (Interval, size and number)						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
6221-30-33-44-50-93						DEPTH INTERVAL					
6300-39-56-58 1 shot/foot						AMOUNT AND KIND MATERIAL USED					
						6221-6358 2500 gal acid					
						6221-6358 40,000 gallons, 40,000# sand					
33. PRODUCTION											
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)						Well Status (Prod. or Shut-in)			
10-28-65		Flowing						Prod.			
Date of Test		Hours Tested		Choke Size		Prod'n. For Test Period		Oil - Bbl.		Gas - MCF	
10-29-65		24		24/64				74		112	
Flow Tubing Press.		Casing Pressure		Calculated 24-Hour Rate		Oil - Bbl.		Gas - MCF		Water - Bbl.	
150		1000				74		111		0	
34. Disposition of Gas (Sold, used for fuel, vented, etc.)								Test Witnessed By			
Vented								D. M. Norman			
35. List of Attachments											
Sonic log, Micro lateral log, Lateral log, Deviation affidavit											
36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.											
SIGNED 				TITLE Agent				DATE 10-30-65			

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

hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)

(Title)
10-30-65
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY _____
TITLE _____

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A F F I D A V I T

Nov 1 11 39 AM '65

Before me, the undersigned authority, on this day personally appeared Duane M. Norman, who is well known to me, and, after being duly sworn, on his oath states as follows:

That he is a geologist residing in Midland, Texas, and is part owner of a certain oil well known as the Burleson & Huff No. 1 McCallister located in the SW/4 of NW/4 of Section 7, T-22-S, R-38-E, Lea County, New Mexico, and that he personally observed the progress of the drilling of said well and is thoroughly familiar with it;

That the following is the results of deviation surveys run during the drilling of said well:

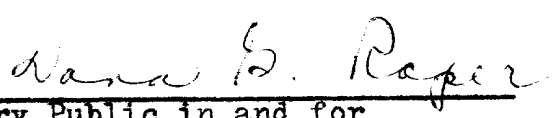
<u>FOOTAGE DEPTH</u>	<u>DEVIATION IN DEGREES FROM VERTICAL</u>
250	0
700	1/4
1011	1-1/4
1310	1-1/4
1615	3/4
2038	3/4
2370	1/2
2737	1/2
2930	1/2
3327	3/4
3707	1-1/4
3975	1-1/4
4948	1-1/4
5189	1-1/4
5553	1-1/4
5850	1-1/4
6310	1-1/4
6678	1-1/4
7073	2
7200	2-1/4


Duane M. Norman

THE STATE OF TEXAS |
COUNTY OF MIDLAND |

Subscribed and sworn to before me, and the foregoing instrument was acknowledged before me this 28th day of October, 1965, by Duane M. Norman.

My Commission Expires:
June 1, 1967


Notary Public in and for
Midland County, Texas

