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TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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 Dallas McCasland	
Address c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead 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					10-030132 (b)	
Lease Name Glosson "B"	Well No. 19	Pool Name, Including Formation Jalmat Yates-Seven Rivers	Kind of Lease State, Federal or Fee Federal	Lease No. above		
Location						
Unit Letter N	660	Feet From The South Line and	1980	Feet From The West		
Line of Section 30	Township 22 S	Range 36 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"/> Texas-New Mexico Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Ashland Oil & Refining Co.	Address (Give address to which approved copy of this form is to be sent) Box 158, Bunkie, New Mexico 88231			
If well produces oil or liquids, give location of tanks.	Unit X	Sec. 30	Twp. 22S	Rge. 36E
Is gas actually connected?		When		
Yes		3/7/76		

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.
X		X		X					
Date Spudded 2/16/76	Date Compl. Ready to Prod. 3/7/76		Total Depth 3972		P.B.T.D. 3960				
Elevations (DF, RKB, RT, GR, etc.) 3521.6 GR	Name of Producing Formation Yates-Seven Rivers		Top Oil/Gas Pay 3549		Tubing Depth 3830				
Perforations 3549-3654, 3667-3782, 3838-63				Depth Casing Shoe 3972					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4	8 5/8		430		275				
7 7/8	5 1/2		3972		350				
	2 3/8		3830						

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)			
OIL WELL			
Date First New Oil Run To Tanks 3/7/76	Date of Test 3/10/76	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test 24	Tubing Pressure 60#	Casing Pressure 320#	Choke Size 1"
Actual Prod. During Test	Oil - Bbls. 30	Water - Bbls. 27	Gas - MCF 148

GAS WELL			
Actual Prod. 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

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.

Herman Walker
(Signature)
Agent
(Title)
3/11/76
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19_____
BY Jerry Sexton
TITLE Secretary

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.