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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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

I. 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 ☒ Change in Transporter of:

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

LC-030132 (b)

Lease Name Clessen "B"	Well No. 21	Pool Name, including Formation Jalnat Yates-Seven Rivers	Kind of Lease State, Federal or Fee Federal	Lease No. above
Location Unit Letter K ; 1650 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 Company	Address (Give address to which approved copy of this form is to be sent) Box 158, Emice, New Mexico 88231					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 30	Twp. 22S	Rge. 36E	Is gas actually connected? Yes	When 2/27/78

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 <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
Date Spudded 2/8/78	Date Compl. Ready to Prod. 2/27/78		Total Depth 3935		P.B.T.D. 3926			
Elevations (DF, RKB, RT, GR, etc.) 3534 KB	Name of Producing Formation Yates-Seven Rivers		Top Oil/Gas Pay 3793		Tubing Depth 3697			
Perforations 3793-3883					Depth Casing Shoe 3929			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		438		270			
7 7/8	5 1/2		3929		750			
	2 3/8		3697					

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 2/27/78	Date of Test 2/28/78	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure 20	Casing Pressure 300	Choke Size 2"
Actual Prod. During Test 160 bbls fluid	Oil-Bbls. 10	Water-Bbls. 150	Gas-MCF 12

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.

ORIG. SIGNED BY: DONNA HOLLER

(Signature)
Agent

(Title)
3/2/78

(Date)

OIL CONSERVATION COMMISSION

APPROVED **MAP 3 1978**, 19
BY **John W. Thompson**
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 Form C-104 must be filed for each pool in multiple completed wells.