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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-210  
Effective 1-1-65

B.R.

Operator W. M. GALLAWAY	
Address 101-2 Petroleum Plaza Bldg., Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	

If change of ownership give name and address of previous owner \_\_\_\_\_

Lease Name Delo		Well No. 12	Pool Name, including Formation Bisti-Lower Gallup	Kind of Lease State, Federal or Fee U.S.	Lease No. NMO 6252
Location					
Unit Letter K ; 2222 Feet From The South Line and 1562 Feet From The West					
Line of Section 26 Township 25 North Range 11 West , NMPM, San Juan County					

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 Corporation		P. O. Box 1183, Houston, Texas 77001				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas Co.		P. O. Box 1492, El Paso, Texas 79978				
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 26	Twp. 25	Rge. 11	Is gas actually connected? No	When As soon as possible.

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X	X					
Date Spudded 8-7-77	Date Compl. Ready to Prod. 9-1-77	Total Depth 5321'		P.B.T.D. 5275'					
Elevations (DF, RKB, RT, GR, etc.) 6720' GR	Name of Producing Formation Bisti Gallup	Top Oil/Gas Pay 5156'		Tubing Depth 5162'					
Perforations 5156' - 5161'				Depth Casing Shoe 5312.32'					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8"		213.14		150				
7 7/8"	4 1/2"		5312.32'		580				
	2 3/8"		5261.60		None				

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF		

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DIST. 3

GAS WELL		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test-MCF/D 411	Length of Test 24 hrs	1 bbl. Frac water			
Testing Method (pitot, back pr.) 2" orifice	Tubing Pressure (shut-in) Pumping	Casing Pressure (shut-in) 274	Choke Size 3/4"		

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.

W. M. Gallaway  
(Signature)  
Operator  
(Title)  
Sept. 27, 1977  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 29 1977, 19\_\_\_\_

BY Original Signed by A. R. Kendrick

TITLE SUPERVISOR DIST. 3

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.