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TRANSPORTER	OIL
	GAS
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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

I. Operator
W. M. GALLAWAY
Address
101-2 Petroleum Plaza Building, Farmington, New Mexico 87401
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name **Dele** Well No. **10** Pool Name, Including Formation **San Juan** Kind of Lease **Fed.** Lease No. **SF-047020**
Location **Unit Letter I ; 1850 Feet From The South Line and 838 Feet From The East**
Line of Section **26** Township **29 North,** Range **11 West**, NMPM, **San Juan** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Company **Fidelity Union Tower, Dallas, Tx. 75201**
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
No

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.
Date Spudded **4-3-74** Date Compl. Ready to Prod. **6-12-74** Total Depth **2908** P.B.T.D. **2888**
Elevations (DF, RKB, RT, GR, etc.) **5571' KB** Name of Producing Formation **Chaera** Top Oil/Gas Pay **2846** Tubing Depth
Perforations **2846' - 2856'** Depth Casing Shoe **2900.04'**
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
10 3/4" **8 5/8"** **78.31'** **50 sx.**
6 3/4" **4 "** **2900.04'** **175 sx.**

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.
3 Hours
No tubing
Shut-in 1085

GAS WELL
Actual Prod. Test-MCF/D **2304** Length of Test **3 Hours** Bbls. Condensate/MMCF **TSTM** Gravity **37.4**
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size
Multipoint Back Pr. **No tubing** **Shut-in 1085**

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)
January 14, 1975
(Date)

OIL CONSERVATION COMMISSION
JAN 15 1974
APPROVED
Original Signed by **A. R. Kendrick**
PETROLEUM ENGINEER DIST. NO. 3
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.