

OIL CONSERVATION DIV.

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

RECEIVED BY
MAY -8 1987
O. C. D. REQUEST FOR ALLOWABLE
AND
ARTIFICIAL OFFICE
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

McKay Oil Corporation

Address
Post Office Box 2014, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Miller Federal	Well No. 1	Pool Name, Including Formation W. Pecos Slope Abo	Kind of Lease Federal State, Federal or Fee NM-32322	Lease
Location				
Unit Letter H	: 1980'	Feet From The North	Line and 660	Feet From The East
Line of Section 7	Township 6S	Range 23E	NMPM, Chaves	C

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
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)					
NM Gas Marketing, Inc.	Post Office Box 2014, Roswell, NM 88201					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 36	Twp. 6S	Rge. 22E	Is gas actually connected? Yes	When 5-2-87

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Res't.	Diff.
		X	X					
Date Spudded 12-15-82	Date Compl. Ready to Prod. 1-23-83	Total Depth 3550'	P.B.T.D. 3170'					
Elevations (DF, RAB, RT, GR, etc.) 4186.72 GL	Name of Producing Formation Abo	Top Oil/Gas Pay 2998'	Tubing Depth 2680'					
Perforations 2998-3102'	Depth Casing Shoe							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	60'	grouted to surf.
9 7/8"	7 5/8"	1408'	700 sxs. + 150 sx
6 3/4"	4 1/2"	3319'	595 sxs.
	2 3/8"	2680'	

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
able 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-Bble.	Water-Bble.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1-28-82 72	Length of Test 6 hrs	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.) back pr.	Tubing Pressure (Shut-in) 705	Casing Pressure (Shut-in) 705	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given
above is true and complete to the best of my knowledge and belief.Theresa Rodriguez
(Signature)Production Analyst
(Title)5-5-87
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 11 1987, 19

BY Original Signed By
Les A. Clements

TITLE Supervisor District II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep
well, this form must be accompanied by a tabulation of the devi
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for a
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of o
well name or number, or transporter, or other such change of condSeparate Form C-104 must be filed for each pool in mul
complected wells