GTATE OF NEW MEXICO

HOT AND MINUTE	100.00	1	0111	i V11,1
(restment)	11110 (14)	-		
FAMIA FE		7		۴
V B.U.B.				
IMANSPORTER	OIL	<u>-</u>		
OPERATOR				
PROPATION OFF	ic #			

Production Analyst

September 3, 1987

(Title)

OIL CONSERVATION DIVISION P. O. DOX 2088

SANTA FC, NEW MEXICO 87501

RECEIVED

OCT 13'87

O. C. D.

If this is a request for allowable for a newly drilled or despitell, this form must be accompanied by a tabulation of the deviatest taken on the well in accordance with MULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of ow

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PARTION SPPICE	AUTHORIZATION TO TRA	NSPORT OIL AND NAT	URAL GAS	ARTESIA, OFFICE		
McKay Oil Corporat:	ion					
Address Day 200	1/ D13 N M	00201				
	•	88201				
Coson(s) Tor liling (Check proper		Other (Plea	se explain)			
New Well (A)	Change in Transporter of:	(2)				
Electronic []	7=1	Co. A				
Change in Ownershi,	Casinghead Gas Con	denaute				
If change of ownership give named address of previous owner	•					
DESCRIPTION OF WELL AN						
Diama Endamal	Well No. Fool Name, Including		Kind of Lease		L⊕a⊕⊕	
Pierce Federal	5 W. Pecos Slo	ope Abo	State, Feder	State, Federal or Fee NM-36191		
	390 Feet From The South L	ine and 1980	Feet From	The East		
Line of Section 5	Twnahip 6S Range	22E , NMP8	4. Cha	ives	Cou	
COUNTY OF THE SECTION	OTED OF OU AND NATURAL C	245				
Menie of Authorized Transporter of OIL AND NATURAL G		Address (Give address to which approved copy of this form is to be sent)				
None of Authorized Transporter of	Casinghead Gas () of Dry Gas (X)	Address (Give address	to which appro	ved copy of this form is to	be sent)	
New Mexico Gas Market		·		, Roswell, NM 88201		
If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas actually connect				
give location of tanks.	G 36 6S 22E	No yes		9-5-87		
If this production is commingled to COMPLETION DATA	with that from any other lease or pool	, give commingling orde	r number:			
Designate Type of Complete	tion - (X) OII Well Gas Well	New Well Workover	Deepen 1	Plug Back Same Restv 	. Dill. H	
Date Spudded	Date Compl. Heady to Prod. 7-20-87	Total Depth 3400		P.B.T.D. 3310'		
2-6-87 Alevations (DF, RKB, RT, GR, etc.,		Top Oil/Gas Pay		Tubing Depth		
4396 GR	Abo	2812		2777'		
2812 - 3141.5				Depth Casing Shoe		
	TUBING, CASING, AN	D CEMENTING RECOR	D			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT		
12½"	8 5/8"	926'		300 sxs. + 310		
7 7/8"	412"	3388'		325 sxs. + 250		
	2.2701	27771	 			
EST DATA AND REQUEST I	2 3/8" FOR ALLOWARIE (Text must be a	2777	ne of load oil a	nd must be soughto as exc	• • 6 102 0	
OIL WELL	able for this di	ofter recovery of total volumenth or be far full 24 hours, Producing Method (Flow,	1	Post II	1-2	
Date First New Oll Hun To Tanks	Date of Teet	Producing Method (Flow)	, pump, gas siji			
ength of Test	Tubing Pressure	Casing Pressure		Choke Size		
Sctual Prod. During Test	Oil-Bble.	Water - Bble.		Gas - MCF		
		J				
AS WELL						
Actual Frod. Teet-MCF/D	Length of Test	Bbie. Condensate/MMCF		Gravity of Condensate		
158	4 hrs.			Chaha Sic-		
back pr.	Tubing Presewe (Shut-in) 655	Casing Pressure (650t-	,	Choke Size		
ERTIFICATE OF COMPLIAN		(NSFRVATI	ON DIVISION		
				0.4007		
hereby certify that the rules and regulations of the Oil Conservation ivision have been complied with and that the information given save is true and complete to the best of my knowledge and belief.		APPROVED OCT 2 2 1987 19				
		Original Signed By				
		Les A. Clements				
		TITLESupervisor District				
		This form is to b	e illed in co	mpliance with BULE 11	04.	