

P. O. BOX 2004

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JUN 12 1987

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
ARTESIA, OFFICE

McKay Oil Corporation

P.O. Box 2014, Roswell, New Mexico 88202

Reason(s) for filing (Check proper box)

New Well ☒Completion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

Change of ownership give name  
Address of previous owner

## DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Snakeweed Federal	4	W. Pecos Slope-Abo	State, Federal or Fee Federal	NM-32325

Location

Unit Letter J : 1980 Feet From The South Line and 1780 Feet From The EastLine of Section 18 Township 6 South Range 23 East , NMPM, Chaves County

## SIGNATURE 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)

N.M. Gas Marketing, Inc.

P.O. Box 2014, Roswell, New Mexico 88202

Well produces oil or liquids,  
or location of tanks.

Unit	Sec.	Twp.	Rge.
G	36	6S	22E

Is gas actually connected? Yes When 5/18/87

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	Same Res'v.	Diff. Res'
	X	X				X	

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
2/26/87	5/12/87	3440'	3396'

Sections (DF, RAB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
4125' GR	Abo	2904'	2874'

Formations	Depth Casing Shoe
2904-2943' (25), 2994-3009' (11), 3099-3102' (3), 3378-3381' (3), 3311-3317' (5)	3449'

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	986'	1000 SX
7 7/8"	4 1/2"	3449'	575 SX
4 1/2"	2 3/8"	2874'	

Post ID-2  
6-26-87  
comp & BK

TEST DATA AND REQUEST FOR ALLOWABLE  
NEW 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

Total Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

## AS WELL

Total Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
5026 (CAOF)	24 hours	--	--

Testing Method (prior, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size
back pr.	927 psi	927 psi	--

## 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 herein is true and complete to the best of my knowledge and belief.

Theresa Rodriguez  
(Signature)

Production Analyst

(Title)

6/4/87

(Date)

## OIL CONSERVATION DIVISION

JUN 19 1987

APPROVED \_\_\_\_\_, 19

Original Signed By

BY Les A. ClementsTITLE 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 deepened well, this form must be accompanied by a tabulation of the deviate 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 multiple