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TRANSPORTER	OIL 1 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

NOV 5 1965

O. C. C.  
ARTESIA, OFFICE

I. OPERATOR	S. P. YATES		
Address	309 Carper Building, Artesia, New Mexico 8210		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well	Change in Transporter of:		
Recompletion	Oil	Dry Gas	
Change in Ownership	Casinghead Gas	Condensate	Change of pool designation

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease
GALVIN	2-Y	West McMillan -7 Rivers Pool	State, Federal, or Fee Federal
Location			
Unit Letter M	910	Feet From The South Line and 1025	Feet From The West
Line of Section 12	Township 20 South	Range 26 East	NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil X	or Condensate	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation		P. O. Box 3119, Midland, Texas
Name of Authorized Transporter of Casinghead Gas	or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 12
	Twp. 20S	Rge. 26E
Is gas actually connected?	When	

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 X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.					
August 5, 1965	August 11, 1965	74'						
Pool	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
W. McMillan-7 Rivers	7 Rivers - Dolomite	67'	63'					
Perforations						Depth Casing Shoe		
None						None		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
7 3/8"	4" line pipe	63'	4 sxs.					

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.)	
August 11, 1965	August 11, 1965	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours			
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
	24 Barrels Oil	2 Barrels Water	None

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

R. L. Norman  
(Signature)  
Geologist  
(Title)

November 3, 1965  
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 5 1965  
BY M. L. Armstrong  
TITLE OIL AND GAS PROPERTY

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 Sections I, II, III, and VI only 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