Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1.	1	TO TRA	NSI	PORT OIL	_ AND NA	TURAL G	ias				
Operator Kerr McGee Corporatio	Weii API No. 300392279500S1										
Address		0100	-								
PO Box 250, Amarillo, Reason(s) for Filing (Check proper box)	1X /	9189			C Ott	et (Please exp	Jain)				
New Well		Change in	Trans	porter of:		ici (1 tempe exp	ши				
Recompletion	Oil		Dry (•							
Change in Operator	Casinghead		•	lensate							
If change of operator give name								····			
and address of previous operator	AND LEA	er.									
II. DESCRIPTION OF WELL Lease Name			Pool	Name, Includi	ng Formation		Kino	of Lease Fe	ed L	ease No.	
Betty C-31	4 Lybrook ((Gallup) Sta			Federal or Fee NM 014023			
Location				<u> </u>							
Unit LetterM	_:660	0	Feet	From The	South Lin	e and620	<u> </u>	eet From The	West	Line	
Section 31 Townshi	p 24N		Rang	e 7W	, N	мрм , Ri	o Arrit	a		County	
III. DESIGNATION OF TRAN	SPORTE	R OF OI	L A	ND NATU							
Name of Authorized Transporter of Oil		or Condens	sate					d copy of this f		nt)	
Giant Refining Company					PO Box 256, Farmington, NM 87499						
Name of Authorized Transporter of Casinghead Gas X or Dry Gas					Address (Give address to which approved copy of this form is to be sent) 3934 FM 1960 West, Suite 240, Houston, TX						
Bannon Energy Incorpo If well produces oil or liquids,		<u> </u>	T		3934 FM	<u>1960 We</u>			Houston,	_IX_7706	
give location of tanks.	Unit	Sec. 31	Twp. 24	• •	Is gas actuall Yes	y connected?	Whe	n.? NA			
f this production is commingled with that			<u> </u>			ber:		NA .			
IV. COMPLETION DATA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o. p	, 6	,		····					
Designate Type of Completion	- (X)	Oil Well	Ţ	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		Ready to	Prod	· · · · ·	Total Depth	<u> </u>	<u> </u>	DRTD			
Date Spudded Date Compl. Ready to Prod.					1.5.1.5.						
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
Perforations	<u> </u>		-		L., , , , , , , , , , , , , , , , , , ,			Depth Casin	g Shoe		
	71	IDDIC	C 4 C	TNC AND	CTEN CIENTITY	NC DECOL	<u> </u>				
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET				SACKS OF A FAIT		
HOLE SIZE								SACKS CEMENT			
	-				***************************************						
											
V. TEST DATA AND REQUES											
OIL WELL (Test must be after re			f load	oil and must	,				or full 24 hour	s.)	
e First New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Press	sure			Casing Pressa	ıre	fl	Ci Ge Be	FIVE		
		_				N m m m m m m m m m m m m m m m m m m m					
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF	MAY2 2 1990		
	L				<u> </u>			MAIZ	Z 199U		
GAS WELL Actual Prod. Test - MCF/D	TY				Bbis. Conden	ADICE			N. DA	4	
Actual Prod. Test - MCP/D	Length of To	CSL			Bois. Conden	sate/MIMCr	į	Cravity of	W. Carrier	-	
esting Method (pitot, back pr.)	Tubing Pres	bing Pressure (Shut-in)				re (Shut-in)		Choke Size	71. 4		
					_		*				
VI. OPERATOR CERTIFIC.	ATE OF	COMPI	[JA]	NCE				 			
I hereby certify that the rules and regula				- · · - · ·		DIL CON	ISERV	ATION I		N	
Division have been complied with and t			n abov	ve				MAY 2	2 1990		
is true and complete to the best of my k	nowledge and	Dellef.			Date	Approve	:d				
(Ja+ Mari	and	. /						٠١) ﴿	- /	,	
Signature X (CTA)	<u>.u</u>	<u> </u>			Ву			~	مريد بيماعر		
<u> Pat Garrard</u>	Pr	roduct:		Clerk			SUP	ERVISOR	DISTRICT	#3	
Printed Name May 15, 1990	(806		Title	51	Title		···-				
Date Date		Telep									

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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