Submit 5 Copies
Appropriate District Office
DISTRICT I
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 DISTRICT II P.O. Drawer DD, Anesia, NM 88210

P.O. Box 2088 Santa Fe. New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I				TO TRA	NSP	ORT OIL	AND NA	TURAL GA		Pi No.			
Operator									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	u 1110.			
Kerr-McGe	e Co	cporati	ion						<u> </u>				
P. 0. Box	x 250	, Amar	illo,	TX 79	189								
Reason(s) for Filing (New Well Recompletion	Check pro	oper bax)	Oil	_	Dry G	ias 🔲	Flag-Re	dfern Oi Gee Corp	1 Co. w		ed into		
Change in Operator	X	,	Casinghas		Conde								
I change of operator and address of previous	re obeusto	Fla	g-Redf	ern Oi	1Co	P.O.	Box 11	050, Mid	land, I	X 7970	2		
II. DESCRIPTI	ON OF	WELL	AND LE						100			ease No.	
Lease Name Gentle				Well No.		Name, Includi inon (F	cuitland)			of Lease Fed Lease No. Federal or Fee NM 010063			
Location Unit Letter	Unit Letter		890 Feet From The				North Line and 1100 Fe			et From The West Line			
Section	Section 9 Township		, 28N _{Range} 11W				, NMPM , Sa			an Juan County			
Ⅲ. DESIGNAT	TON O	F TRAN	SPORTE	R OF O	IL A	ND NATU	RAL GAS						
Name of Authorized				or Conde			Address (Giv	e address to wh	uch approved	copy of thus f	orm is to be se	nu)	
Name of Authorized El Paso Na	ame of Authorized Transporter of Casings 1 Paso Natural Gas Co				or Dr	y Gas 💢	P. O. Box 1492, F. Pas			:			
If well produces oil of give location of tanks	or liquids,		Unit	Sec.	Twp.	Rge.	Is gas actuall Yes	y connected?	When	⁷ NA			
If this production is o			from any ou	her lease or	pool, g	rive comming	ling order num	ber:					
Designate Typ			- (Y)	Oil Wel	1	Gas Weil	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Resiv	
Date Spudded		Date Compt. Ready to Prod.				Total Depth			P.B.T D.				
Elevations (DF, RKE	Name of I	Producing F	omatic	36	Top Oil/Gas Pay			Tubing Depth					
Perforations										Depth Casing Shoe			
				TUBING	. CAS	ING AND	CEMENTI	NG RECOR	D D	. !			
HOLE SIZE				ASING & T			DEPTH SET			SACKS CEMENT			
			ļ							 			
			-							 			
													
V. TEST DATA							n be equal to o	r exceed top all	owable for th	is depth or be	for full 24 hou	urs.)	
Date First New Oil		Date of T				Producing Method (Flow, pump, gas lift, etc.)							
					Casing Caring Ca								
Length of Test			Tubing P	LETETLE			T.		2 A A 1				
Actual Prod. During Test			Oil - Bbis.				Water - Bbli	JULS	7 1989	G. MCF			
GAS WELL			· · · · · · · · · · · · · · · · · · ·				C)IL CO	N. Frie	از مخور			
Actual Prod. Test -	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensale-					
Testing Method (puot, back pr.)			Tubing Pressure (Shut-in)				Casing Pres	aure (Shut-in)		Choke Size	· · · · · · · · · · · · · · · · · · ·		
VI. OPERAT I hereby certify to Division have be is true and compared to the signature of t	char the ruses complete to the	les and regulated with acceptance to the second of my	alations of the distribution of the distributi	ore Oil Consider of Cons	ervation about	lnit.		OIL CON	ed	JUL 2	DIVISION TO THE PROPERTY OF TH		
As of J	une 3	0, 198	9	405/27 Te	0-21 lephoo			·			-		

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.