Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

DISTRICTI

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Ro., Azzec, NMI 8/410		EST FOF			LE AND A						
Uperator		O ITIAIT	01 01	11 012	7410 1411	<u> </u>		PI No.			
Kerr-McGee Corporati	on										
Address P. O. Box 250, Amari		X 7918	9								
Reason(s) for Filing (Check proper box)					Othe	t (Please expla	21/1)				
New Well		Change in Tr	•	a ol:	Flag-Red	dfern Oi	1 Co. w	as merg	ed into		
Recompletion \Box	Oil Casinghee	_	ry Gas ondensa		Kerr-Mc(
Change in Operator X	<u>-</u>				Box 110	nen Mic	lland T	V 7070	2		
and address of previous operator FIGU			و حالما	. P.U.	-ROX "TTI	1:1(1 ₉ PH 1.1.	Hanu, i	A-7970			
. DESCRIPTION OF WELL AND LEASE Asse Name Well No. Pool Name, Including					ng Formation Kind o			of Lease Fe	Lease Fed Lease No.		
Aloha	2 Fulcher Ku			Crota			Federal or Fee NM 013365				
Location				M.		. 070			11		
Unit Letter	.:8	50F	et From	n The NO	orth Line	and 8/U	Fe	et From The	west	Line	
Section 16 Township 28N Range 11W					, NA	MM,		San Juan County			
				N. 4. 1979 11	242						
III. DESIGNATION OF TRANS Name of Authorized Transporter of Oil	SPORTE	or Condensat		NATU	Address (Giw	address to w	hich approved	copy of this fo	orm is to be se	nt)	
Name of Authorized Transporter of Casinghead Gas or Dry Gas X								copy of this form is to be sent)			
	Paso Natural Gas Company ell produces oil or liquids, Unit Sec. Twp. Rg			Rge	P.O. Box 1492, F1 Pase Is gas actually connected? When						
give location of tanks.	D	•	28N j	11W	Yes		•	7/81			
If this production is commingled with that f	rom any oth	er lease or po	ol, give	commingi	ng order numi	er:					
IV. COMPLETION DATA		Oil Well	- Ca	s Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion -	· (X)		"	a well	1 1464 1464 1			1 7108 2202			
Date Spudded	Date Comp	al. Ready to P	rud.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Brodung Company			Top Oil/Gas Pay			Tuhing Den	Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation											
Perforations			-					Depth Casin	ig Shoe		
		TIRING C	A SIN	G AND	CEMENTI	NG RECOR	2.0				
HOLE SIZE	TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	 -		 								
							-				
V. TEST DATA AND REQUES											
OIL WELL (Test must be after re	Date of Te		load ou	and must		exceed top all thou (Flow, p			for full 24 hou	YS.)	
						T OF T		9337			
ength of Test Tubing Pressure					Casind Blacate			Charle Size	Chole Size		
Actual Prod. During Test	Oil - Bbis.				Water Bota			Gas MCF		 -	
7.000 DZ.III	0					JUI 27					
	1							,			
GAS WELL	1				Ol	I Com					
GAS WELL Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conden	T C		Gravity of	Condensate		
Actual Prod. Test - MCF/D			3)			DIST.	. 2	Gravity of (
•		Test essure (Shut-ir	1)		Bbls. Conden	DIST.				•	
Actual Prod. Test - MCF/D	Tubing Pro	essure (Shut-ir		CE	Casing Press	DIST.	3 3	Choke Size	-		
Actual Prod. Test - MCF/D Testing Method (pulot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regula	Tubing Pro	esaire (Shut-ir F COMPL Oil Conserva	IAN(CE	Casing Press	DIST.	NSERV	Choke Size		; DN	
Actual Prod. Test - MCF/D Testing Method (puox, back pr.) VI. OPERATOR CERTIFIC	ATE OF	COMPLE Oil Conserva	IAN(CE	Casing Press	DIST, un (Shut-in) OIL COI		Choke Size	DIVISIO	; DN	
Actual Prod. Test - MCF/D Testing Method (pilot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regulation have been complied with aid is true and complete to the bast of ring in	ATE OF ations of the that the info	COMPLE Oil Conserva	IAN(CE	Casing Press	DIST.		Choke Size	DIVISIO	ì. DN	
Actual Prod. Test - MCF/D Testing Method (puor, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regulation have been complied with aid is true and complete to the bast of ney in the pure of the bast of new interest of the bast of the bast of the bast of new interest of the bast of the	ATE OF ations of the that the info	COMPLE Oil Conserva	IAN(CE	Casing Press	DIST, un (Shut-in) OIL COI	be	ATION JUL 27	DIVISIO 1989		
Actual Prod. Test - MCF/D Testing Method (pilot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regulation have been complied with aid is true and complete to the bast of ring in	ATE OF ations of the that the info	CONS	IAN(Casing Press	DIST, un (Shut-in) OIL COI	be	ATION JUL 27	DIVISIO		

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

As of June 30, 1989

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Telephone No.

- All sections of this form must be filled out for allowable on new and recompleted wells.
 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.