

| | |
|------------------|-----|
| STATE | |
| FEDERAL | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRORATION OFFICE | |

REQUEST FOR ALLOWABLE
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes O.C. 1-1-55
 1-1-55

HOBBS OFFICE
 SEP 21 11 48 AM '66

DUPLICATE

I. OPERATOR: KERN COUNTY LAND CO.
 ADDRESS: 418 FIRST STATE BANK BLDG, MIDLAND, TEXAS
 Reason(s) for filing (Check proper box):
 New Well Change in Transporter of:
 Recompletion Oil Dry Gas
 Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE
 Lease Name: FERROVIA 23 Well No.: 2 Pool Name, including Formation: CHAUVERON - SAN ANTONIO Kind of Lease: FEDERAL
 Location: Unit Letter A : 190A Feet From The WEST Line and 660 Feet From The SOUTH
 Line of Section 23 Township 7S Range 33E , NMPM, ROOSEVELT County

III. DESIGNATION 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):
701 PERMIAN CORP. Box 319, 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 J Sec. 23 Twp. 7S Rge. 33E Is gas actually connected? NO 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 Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
 Date Spudded: 8-31-66 Date Compl. Ready to Prod.: 9-16-66 Total Depth: 4580 P.B.T.D.: 4344
 Elevations (DF, RKB, RT, GR, etc.): 4364' KB Name of Producing Formation: SAN ANTONIO Top Oil/Gas Pay: 4130' Tubing Depth: 4130
 Perforations: 4130, 84, 82, 90, 92, 94; 4204, 08, 16, 29, 31, 33, 39 & 43' Depth Casing Shoe: 4384
 TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|----------------|----------------------|--------------|----------------------|
| <u>17 1/2"</u> | <u>13 5/8"</u> | <u>505'</u> | <u>10584 (10584)</u> |
| <u>8 1/2"</u> | <u>11"</u> | <u>3455'</u> | <u>6000 (6000)</u> |
| <u>7 7/8"</u> | <u>4 1/2"</u> | <u>4384'</u> | <u>3000</u> |
| | <u>2 3/8"</u> | <u>4130'</u> | <u>4416</u> |

V. TEST DATA AND REQUEST FOR ALLOWABLE (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)
 OIL WELL
 Date First New Oil Run To Tanks: 9-16-66 Date of Test: 9-19-66 Producing Method (Flow, pump, gas lift, etc.): PUMP
 Length of Test: 7 HRS. Tubing Pressure: NA Casing Pressure: NA Choke Size: 1/4"
 Actual Prod. During Test: 56 Oil - Bbls.: 48 Water - Bbls.: 8 Gas - MCF: NA

GAS WELL
 Actual Prod. Test-MCF/D _____ Length of Test _____ Bbls. Condensate/MMCF _____ Gravity of Condensate _____
 Testing Method (pitot, back pr.) _____ Tubing Pressure (shut-in) _____ Casing Pressure (shut-in) _____ 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.
Ray S. Murray
 (Signature)
PROD. SECRETARY
 (Title)
9-20-66
 (Date)

OIL CONSERVATION COMMISSION
 APPROVED SEP 22 1966, 19____
 BY _____
 TITLE _____
 This form is to be filed in compliance with RULE 110.
 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 wells on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of ownership, well name or number, or transporter, or other such change of ownership.
 Separate Forms C-104 must be filed for each well to which this form applies.