Submit 5 Copies
Appropriate Distinct Office
DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III

State of New Mexico Energy, Minerals and Natural Resources De, ment

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

1000 Rio Brazos Rd., Aztec, NM 87410 I.	REQI					AUTHOR TURAL G				
Openior Kerr-McGee Corpora			Well API No. 30-025-24496							
Address One Marienfeld Place, Suite 200, Midland,										
Reason(s) for Filing (Check proper box)	ce, sui	<u>te 201</u>	i, M1	<u>alana,</u>	<u>TX 797</u> Ou	101 her (Please exp	lain)			
New Well	Oil	Change in	n Transp Dry G		Flag-Re	edfern O	il Co. v	vas merged in	nto	
Change in Operator	Casinghe	ud Gas	Conde		Kerr-Mo	Gee Cor	p. on 6/	30/89		
I change of operator give name address of previous operator Elag	g-Redfe	rn Oil	<u> </u>	, P.O.	Box 110	<u>)50, Mid</u>	land, T)	79702		
II. DESCRIPTION OF WELL Lease Name	AND LE	ASE Well No.	Bool	Name Includ	ing Formation		Kind	of Lease Fed	Lana Ma	
Marathon Federal		1			- ·	<u>n Andres</u>		Federal or Fee	Lease No. 0659	
Unit LetterF	_ :21	.80	_ Feat F	rom The	lorth u	and <u>19</u>	<u>80 </u> F	et From The	tLine	
Section 23 Townsh	nip 95	ò	Range		•	IMPM,		Lea	County	
II. DESIGNATION OF TRA	NSPORTE	R OF O	IL AN	ND NATU	RAL GAS					
Name of Authonzed Transporter of Oil	X	or Conde			Address (Gi	ve address to w		copy of this form is to		
Lantern Petroleum Co Name of Authonized Transporter of Casi		X	or Dry	Gas	Address (Gi	BOX 228. We address to w	L. MICLE	and TX 7970	be sent)	
Cities Service Oil (ompany	JXY		- Anc		Box 300				
If well produces oil or liquids, give location of tanks.	Uout F	sec. / 23	Twp.	Rge. 37E	is gas actual	iy connected? Yes	When	າ 5/75		
f this production is commingled with that					ling order num		A	<u> </u>		
V. COMPLETION DATA		Oil Wel		Gas Well	New Well	Workover	Deepen	Plug Back Same Re	s'v Diff Res'v	
Designate Type of Completion		_i	l.			1				
Dale Spudded	هنگ مندن	pt Ready L	o Prud.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
Perforations					1			Depth Casing Shoe		
······	TUBING, CASING AND							· · · · · · · · · · · · · · · · · · ·		
	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
	····									
						· · · · · · · · · · · · · · · · · · ·				
V. TEST DATA AND REQUE					<u> </u>			<u></u>		
DIL WELL (Test must be after Date First New Oil Rup To Tank	Date of Te		of load	oil and mus		r exceed top all lethod (Flow, p		t depth or be for full 24 uc.)	hours.)	
Length of Test	i Tubar Dr				Casing Press			Choke Size		
·	Tubing Pri	Tubing Pressure			Casing Pressure					
Actual Prod. During Test	Oil - Bbia.			Water - Bola.			Gaa- MCF			
GAS WELL					<u> </u>		<u> </u>	<u>+</u>		
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate		
Tesung Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
VL OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have be a complied with and that the information given above is true and complete to the best of my knowledge and belief.				OIL CONSERVATION DIVISION Date ApprovedAUG8 1989						
Signand Signand Ivan D. Geddie Mgr., Cons. & Unit.					ORIGINAL SIGNED BY JERRY SEXTON By DISTRICT I SUPERVISOR					
Printed Name As of June 30, 1989 Date		405/27	Title '0-21 sphone !		Title	<u> </u>			<u></u>	

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.