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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE O. C. C.
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS
JUL 27 4 18 PM '66

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. **Operator** → DEVIATION SURVEY ON REVERSE SIDE ←
KERN COUNTY LAND COMPANY
Address 418 FIRST STATE BANK MIDLAND, TEXAS
Reason(s) for filing (Check proper box) **Other (Please explain)**
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 <u>FEDERAL 23</u>	Well No. <u>3</u>	Pool Name, Including Formation <u>CHAVEROO SAN ANDRES</u>	Kind of Lease <u>FED</u>	Lease No.
Location Unit Letter <u>0</u> : <u>1980</u> Feet From The <u>EAST</u> Line and <u>660</u> Feet From The <u>SOUTH</u> Line of Section <u>23</u> Township <u>7S</u> Range <u>33E</u> , NMPM, <u>ROOSEVELT</u> County				

III. **DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>PERMIAN CORP</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 3119 MIDLAND, TEXAS</u>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 <u>J</u>	Sec. <u>23</u>	Twp. <u>7S</u>	Rge. <u>33E</u>	Is gas actually connected? <u>No</u>	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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded <u>7-13-66</u>	Date Compl. Ready to Prod. <u>7-22-66</u>		Total Depth <u>4400</u>		P.B.T.D. <u>4367</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>4340.5 GR.</u>	Name of Producing Formation <u>SAN ANDRES</u>		Top Oil/Gas Pay <u>4117</u>		Tubing Depth <u>4142 KB</u>			
Perforations <u>4117, 19, 83, 89, 91, 4201, 06, 08, 15, 19, 32</u>					Depth Casing Shoe <u>4400</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE <u>8 3/4</u> <u>0 1/4</u>	CASING & TUBING SIZE <u>7" 20#</u> <u>4 1/2" 9.5#</u> <u>2 3/8"</u>		DEPTH SET <u>1825</u> <u>4400</u> <u>4142</u>		SACKS CEMENT <u>375</u> <u>350</u>			

V. **TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL**

(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)

Date First New Oil Run To Tanks <u>7-27-66</u>	Date of Test <u>7-27-66</u>	Producing Method (Flow, pump, gas lift, etc.) <u>FLOW</u>	
Length of Test <u>2-3 1/4 HRS</u>	Tubing Pressure <u>100</u>	Casing Pressure <u>250</u>	Choke Size <u>32/64</u>
Actual Prod. During Test <u>54</u>	Oil-Bbls. <u>54</u>	Water-Bbls. <u>2</u>	Gas-MCF <u>55</u>

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.

Monroe R. Karasick
(Signature)
DISTRICT ACCOUNTANT
(Title)
7-28-66
(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 9 1966, 19
BY
TITLE

This form is to be filed in compliance with RULE 1104.

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 allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply

SURVEY DEPTH

500	1/2
1000	1
1539	1 1/4
1825	1
2275	1 1/2
2750	2
3271	1
3827	1
4000	3/4
4241	3/4
4400	1

DEVIATION DEGREE

THE ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE
Alfred K. Kinnard
 District Accountant

SWORN TO ME THIS DATE THE 28th OF JULY, 1966

Notary Public
 IN & FOR MIDLAND COUNTY, TEXAS
 My Commission Expires 6-31-67