

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I. → DEVIATION SURVEY ON REVERSE SIDE ←

Operator KERN COUNTY LAND COMPANY	
Address 418 FIRST STATE BANK BLDG MIDLAND, TEXAS	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name FEDERAL 23	Well No. 8	Pool Name, Including Formation (Chauveroo-San Andres)	Kind of Lease State, Federal or Fee FED	Lease No.
Location Unit Letter I : 660 Feet From The EAST Line and 1980 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 <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent.) Box 3119 MIDLAND, TEXAS					
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 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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Rest.	Diff. Rest.
Date Spudded 7-8-66	Date Compl. Ready to Prod. 7-19-66	Total Depth 4450	P.B.T.D. 4410					
Elevations (DF, RKB, RT, GR, etc.) 4336.5 GR	Name of Producing Formation SAN ANDRES	Top Oil/Gas Pay 4105	Tubing Depth 4248					
Perforations 4105; 07; 69; 72; 82; 87; 89; 94; 4212; 15; 22; 27			Depth Casing Shoe 4450					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
8 3/4	7"	1815	350					
6 1/4	4 1/2"	4450	350					
	2 3/8	4248						

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 7-19-66	Date of Test 7-19-66	Producing Method (Flow, pump, gas lift, etc.) FLOW	
Length of Test 2 1/2 HRS	Tubing Pressure 130	Casing Pressure NA	Choke Size 40/64
Actual Prod. During Test 62	Oil-Bbls. 62	Water-Bbls. -	Gas-MCF 34

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.

Monaco R. Karamash
(Signature)

DISTRICT ACCOUNTANT
(Title)

7-21-66
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 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

DEVIATION
DEPTH

2310

2737

3069

3330

3799

3900

4060

4324

SURVEY
DEGREE

1 $\frac{3}{4}$

2

1 $\frac{3}{4}$

2 $\frac{3}{4}$

2 $\frac{3}{4}$

1 $\frac{1}{4}$

1

1 $\frac{1}{4}$

THE ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Alonzo R. Kammach
DISTRICT ACCOUNTANT

SWORN TO ME THIS DATE THE 21st OF JULY, 1966

[Signature]
NOTARY PUBLIC
IN AND FOR MIDLAND COUNTY, TEXAS

My Commission Expires 6-1-67