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NEW MEXICO OIL CONSERVATION COMMISSION .

Form C-104
Supersedes Old C-104 and C-110

	SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
	FILE		AND	246	
	U.S.G.S.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL (3A5	
	OIL				
	TRANSPORTER GAS				
	OPERATOR				
	PRORATION OFFICE				
1.	Operator				
	Kerr-McGee Corporation				
	ddress				
	P. O. Box K. Sunray. Texas				
	P. (). Box K. Sunray 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 Conden	sate		
	If shows of suppossible give name				
	If change of ownership give name and address of previous owner				
				leec	
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation (haveroo Kind of Leas	se Lease No.	
) · 1	n Andres	ol or Fee State OG 1193	
	State G	4 Chaveroo Sa	ii Aliares		
	2 (60	Couth	. 2 370	The East	
Unit Letter 0; 660 Feet From The South Line and 2,310 Feet From The East				1110	
	Line of Section 19 Tow	nship 7 S Range 34	E , NMPM, Roos	sevelt County	
	Eine of Section 19				
HT.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	s		
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro	I	
	The Permian Corpor	ation	1509 W. Wall, Midland,	Texas	
	Name of Authorized Transporter of Cas.	inghead Gas X or Dry Gas	Address (Give address to which appro	oved copy of this form is to be sent)	
	None				
	If well produces oil or liquids,	Unit Sec. Twp. Rge.		nen	
	give location of tanks.	0 19 7 S 34 E	No		
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completio	n - (X)	New Well Workers.		
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Date Spudded		4.400	4.371	
	6-23-66 Elevations (DF, RKB, RT, GR, etc.)	7-11-66 Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
		•	4.1381	4.078	
	1, 314.5 GR	San Andres	1 7 561 J. 1611 J. 1701	Depth Casing Shoe	
	periodical 1 per foot at 1	,138', 4,145', 4,151', 4,208', 4,231', 4,237'	1. 21.31 1. 250 1. 256	h.h00*	
		1 2751 TUBING, CASING, AND	CEMENTING RECORD		
	4,261', 4,267', 4,272',	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12 ¹ n	8-5/8" OD	J ₁ 31.	275	
	7-7/8 ^H	Sin OD	4,400!	350	
		2-3/8" OD	1,0781		
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	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
			Flow		
	7=8=66 Length of Test	7-11-66 Tubing Pressure	Casing Pressure	Choke Size	
		200#	575#	22/6L ¹¹ Gas-MCF	
	13 hours Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF	
		295 BOPD	0	150 MCFPD EST.	
	160	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	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		OIL CONSERV	ATION COMMISSION	
			ABBBOVED 19		
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED , 19		
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		11		
	apove is true and complete to the	· · · · · · · · · · · · · · · · · · ·	1		
			TITLE		
	(a) (a)		This form is to be filed in compliance with RULE 1104.		
	G. J. Dreeden		as at the transport for allowable for a newly drilled or deepened		
	(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
	Engineer		All sections of this form t	All sections of this form must be filled out completely for allow-	
	(Title)		able on new and recompleted wells.		
	July 15, 1966		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.		
			'(well name of number of itankii		
	(D	ate)	Senarate Forms C-104 mi	ust be filed for each pool in multiply	