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DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL			
	GAS			
OPERATOR				
		1		

	DISTRIBUTION SANTA FE		ONSERVATION COMMISSIO		0110101		
	FILE	REQUEST FOR ALLOWABLE			Old C-104 and C-110 -65		
	ANU						
	LAND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
	TRANSPORTER OIL						
	GAS OPERATOR						
1.	PRORATION OFFICE						
Operato:							
	Kerr-McGee Corporation						
	P. O. Box K, Sunray,	Texas					
	Reason(s) for filing (Check proper box)		Other (Please expla	zin)			
	New Well	Change in Transporter of:					
	Recompletion	Oil Dry Gas					
	Change in Ownership	Casinghead Gas Condens	scite				
	If change of ownership give name						
	and address of previous owner						
II.	DESCRIPTION OF WELL AND I	EASE Well No. Pool Name, Including Fo	ermation Find	of Lease	Lease No.		
	State G	5 Chaveroo	· · · · · · · · · · · · · · · · · · ·	e, Federal or Fee State	OG 1193		
	Location						
	Unit Letter I 1,650	Feet From The South Line	e and 990 Fe	et From The East			
	10	9 0 31 7	_		County		
	Line of Section 19 Tow	nship (5 Range 34)	, NMPM, Ro	osevelt	County		
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S				
	Name of Authorized Transporter of Oil The Permian Corporation	ch approved copy of this form i	s to be sent)				
	Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	1509 W. Wall, Mid. Address (Give address to whi	ich approved copy of this form i	s to be sent)		
	None	Name of State of Stat					
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Q. 78 34E	Is gas actually connected?	When			
	this production is commingled with that from any other lease or pool, give commingling order number:						
Designate Type of Completion - (X)					Res'v. Diff. Res'v.		
	, , ,	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	7-28-66	8-26-66	4,410	4.387			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation San Andres	Top Oil/Gas Pay	Tubing Depth			
	Perforations 4,115', 4,120',	4,127', 4,133', 4,142',	4,115' 4,146', 4151', 4,	1771 Depth Casing Shoe			
1	1,183', 4,192', 4,193', 1	1,195', 4,222', 4,229', 4	236 4 242 4 2	501.			
1,255 , 4,259 1 hole per foot TUBING, CASING, AND CEMENTING RECORD							
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS C	EMENT		
	12 ³ " 7-7/8"	8-5/8 ⁿ 53 ⁿ	7,000	275			
	2/3/8tt	2-3/8n	1,0951	350			
V.	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be af	fter recovery of total volume of pth or be for full 24 hours;	load oil and must be equal to d	or exceed top allow-		
	OII. WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)						
8-11-66 8-26-66		8-26-66	Flow				
	12 hours	Tubing Pressure 200#	Casing Pressure 500#	Choke Size			
		Oil-Bbls.	Water-Bbls.	32/6h" Gas-MCF			
	Actual Prod. During Test	234	0	164 EST.			
	GAS WELL	The state of Total	Bbls. Condensate/MMCF	Gravity of Condens	710		
	Actual Prod. Test-MCF/D	Length of Test	Bots. Condensate Minici	Gravity or condens.			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size			
VI.	CERTIFICATE OF COMPLIANCE		OIL CON	SERVATION COMMISS	ION		
	hereby certify that the rules and regulations of the Oil Conservation		APPROVED		_ , 19		
Commission have been complied with and that the information given			BY JOHN JAMES				
	above is true and complete to the best of my knowledge and belief.						
			TITLE				
I O Bille			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened				
	C Y M	ature)	wall this form must be	accompanied by a tabulation	U OI fue dealerrou		
	U Eng	Lneer	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-				

(Title) August 27, 1966

(Date)

able 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 completed wells.