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TRANSPORTER	OIL	
	GAS	
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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.

Operator Kerr-McGee Corporation	
Address Box E, Sunray, 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 State F	Well No. 2	Pool Name, Including Formation Chavaroo San Andres	Kind of Lease State, Federal or Fee State	Lease No. OG 1062
Location				
Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West				
Line of Section 2 Township 8 S Range 33 E , NMPM, Chaves 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"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) 1509 W. Wall, 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 C	Sec. 2	Twp. 8 S	Rge. 33 E	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	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-31-66	Date Compl. Ready to Prod. 6-19-66		Total Depth 4406		P.B.T.D. 4366			
Elevations (DF, RKB, RT, GR, etc.) 4366 KB	Name of Producing Formation San Andres		Top Oil/Gas Pay 4199		Tubing Depth 4180			
Perforations 4199, 4203, 4219, 4221, 4225, 4229, 4256, 4263, 4281, 4285, 4289, 4292, 4314, 4318, 4332, 4344, 4347					Depth Casing Shoe 4406			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/8	8 5/8		398		275			
7 7/8	5 1/2		4406		350			
	2 3/8		4130					

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 6-14-66	Date of Test 6-19-66	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 8 hrs	Tubing Pressure 125 lb	Casing Pressure 650 lb	Choke Size 1 in.
Actual Prod. During Test 87 BBLs	Oil - Bbls. 87	Water - Bbls. 0	Gas - MCF 50

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.

C. J. Brecken
(Signature)

Engineer

(Title)

June 25, 1966

(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 completed wells.