NO. OF COPIES RECEIVED]	-	
	4		
DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
FILE		AND	
U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GAS TIPE
LAND OFFICE	_	L	, , , , , , , , , , , , , , , , , , , ,
TRANSPORTER OIL			
GAS			
OPERATOR			
PRORATION OFFICE	1		
Operator Kerr-McGee Corporation	n		
Address P. O. Box K, Sunray,			
Reason(s) for filing (Check proper box		Other (Please explain)	
New We!I	Change in Transporter of:	, ,	
Recompletion	Oil Dry Ga	. [
		─	
Change in Ownership	Casinghead Gas Conder	isdie	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	LEASE	Chaverro San A	ndres
Lease Name	Well No. Fool Name, Including F		Lease No.
State F	7 Chaveroo Ext.	San Andres State, Federa	olor Fee State OG 1062
Location			
Unit Letter J; 1,9	80 Feet From The South Lin	e and 1,980 Feet From	The East
Line of Section 2 To	wnship 85 Range 3	3E , NMPM, CI	naves County
DESIGNATION OF TRANSPOR	FER OF OIL AND NATURAL GA	S Address (Give address to which appro	and some of this form in to be conti-
The Permian Corporation		1509 W. Wall, "idland	
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which appro	eved copy of this form is to be sent)
None			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	en
give location of tanks.	E 2 8S 33E	No	
	th that from any other lease or pool,	give commingling order number:	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completic	$on = (X)$ χ	1 1 1	
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Date Spudded			4,3321
8 -2 9-66	9-17-66	4,3371	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	
4,357.21 GR	San Andres	4,219	4,2061
Perforations One 0.47 bulle	et per foot at 4,219, 4,	227 4,229 4,235	Depth Casing Shoe
4,241', 4,247', 4,253',	4,258, 4,264, 4,303,	4,312, 4,317, 4,319	4,337'
4,321, 4,324, 4,328,	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 ¹ / ₂ "	8-5/8 ^H	404 *	275
7 - 7/8"	5211	4,3371	350
1-170	2-3/8"	4,206	
	2=3/0	4,200	+
	<u> </u>		
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow
OIL WELL		epth or be for full 24 hours)	in and
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	iji, etc.)
9-11-66	9-17-66 Tubing Pressure	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
6 hours	80	670	28/64 ⁿ
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
·	436	0	328 Est.
109	1 430	<u> </u>	
GAS WELL	t anoth of Tast	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	BDIB. COIMANBULEY MINICE	and the second second
			Chaha Sign
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

VI. CERTIFICATE OF COMPLIANCE

II

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IV

X September 19 1966

OIL CONSERVATION COMMISSION

APPROVED BY.

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.