

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Kerr-McGee Corporation	Well API No.
Address P.O. Box 11050 Midland, TX 79702	
(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) Change in transporter	
Well Completion <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>
Name of operator give name Address of previous operator	

DESCRIPTION OF WELL AND LEASE

Name Amoco Federal	Well No. 2	Pool Name, Including Formation Tom-Tom (San Andres)	Kind of Lease Fed State, Federal or Fee	Lease No. NM12418
Unit Letter K : 1980 Feet From The West Line and 1980 Feet From The South Line				
Section 23 Township 7S Range 31E, NMPM, Chaves County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Authorized Transporter of Oil International Petroleum Company <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2281 Midland, TX 79702					
Authorized Transporter of Casinghead Gas Independent NGL, Inc. <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 50250 Midland, TX 79710					
Producers oil or liquids, or gas or both	Unit N	Sec. 23	Twp. 7S	Rge. 31E	Is gas actually connected? yes	When? 11/79
Production is commingled with that from any other lease or pool, give commingling order number:						

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Completed	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Tests (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
		Depth Casing Shoe						

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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.)			
First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Test	Tubing Pressure	Casing Pressure	Choke Size
Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

WELL

Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Judy Benton
Signature
Judy Benton Analyst II
Date Name Title
October 1, 1991 915/688-7039
Telephone No.

OIL CONSERVATION DIVISION

Date Approved 10/1/1991

By JOHN L. WATKINS, JR., DEPUTY COMMISSIONER

Title DEPUTY COMMISSIONER

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

All sections of this form must be filled out for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

Separate Form C-104 must be filed for each pool in multiply completed wells.