Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources De, ...ment

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Anesia, NM 88210

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410

Santa Fe, New Mexico 87504-2088

I.	REQ					AUTHORI ATURAL G					
Operator Kerr-McGee Corporation							Well	30-005-70712			
Address One Marienfeld Plac	e, Sui	te 200	, Mi	dland,	TX 79						
Reason(s) for Filing (Check proper box) New Well		Change in			<u> </u>	her (Please expli					
Recompletion	Oil Casinghe		Dry G	 🔲	Flag-Re Kerr-Mo	edfern Oi Gee Corp	1 Co. (was mer /30/89	ged into)	
If change of operator give name and address of previous operator Flag	-Redfe	rn Oil	Co.	, P.O.	Box 110)50, Midl	and, T	7970	2		
II. DESCRIPTION OF WELL	AND LE								_		
Amoco Federal	Well No. Pool Name, include 7 Tom-Tom (San And			of Lease Fed Lease No. Federal or Fee NM13418			
Unit Letter	. 19	980	_ Feat F	rom The	East Li	ne and21	.73 F	et From The	South	h Line	
Section 26 Townshi	<u>7</u> 5		Range			(МРМ,			Chaves	County	
III. DESIGNATION OF TRAN	SPORTE			D NATU							
Name of Authorized Transporter of Oil or Condensate Lantern Petroleum Company						Address (Give address to which approved copy of this form is to be sent) P. O. Box 2281, Midland, TX 79702					
Name of Authorized Transporter of Casinghead Gas or Dry Gas						BOX ZZ81 we address to wh	ich approved	copy of thus	opy of this form is to be sent)		
Cities Service Oil C	Gities Service Oil Company OXV NGL and					P. O. Box 300, Tulsa.					
If well produces oil or liquids, give location of tanks.	Unit	Sec./	Twp.	Rge.	is gas actual	ly connected?	When	?			
If this production is commingled with that IV. COMPLETION DATA		1 26 her lease or		1 31E	AG			11/	/9		
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Resiv	
Date Spudded	Date Com	pi. Ready to	Prod.		Total Depth	 		P.B.T.D.	<u> </u>		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations					I			Depth Casing Shoe			
		TUBING.	CASI	NG AND	CEMENTI	NG RECORI	<u> </u>				
HOLE SIZE CASING & TUBING SIZE						DEPTH SET		SACKS CEMENT			
V. TEST DATA AND REQUES	T FOR	ALLOW/	ARLE								
OIL WELL (Test must be after re				oil and must	be equal to or	exceed top allo	wable for this	depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	w Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	Tubing Pressure				Casing Pressure			Choke Size	Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbla.			Gas- MCF	Gas- MCF		
GAS WELL					l		····	!			
ctual Prod. Test - MCF/D Length of Test					Bbis. Condensate/MMCF			Gravity of Condensus			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-is)			Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE						· · · · · · · · · · · · · · · · · · · 		L			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION						
is true and complete to the bert of my knowledge and belief.					Date Approved AUG & 1989						
Am 1 9. 22 lbr					Date Approved						
Signature					ORIGINAL SIGNED BY JERRY SEXTON By DISTRICT I SUPERVISOR						
Ivan D. Geddie Mgr., Cons. & Unit. Printed Name Title					Title						
As of June 30, 1989		405/27(Telep)-212 shone N		i ilie						

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

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OCD HOBBS OFFICE