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| DISTRIBUTION | | | | | | | |
| SANTA FE | | | | | | | |
| FILE | | | | | | | |
| u.s.g.s. | | | | | | | |
| LAND OFFICE | | | | | | | |
| TRANSPORTER | OIL | | | | | | |
| | GAS | | | | | | |
| OPERATOR | | | | | | | |
| PRORATION OF | <u> </u> | | | | | | |
| Kerr-McGe Address P O Box Reason(s) for filing New We!1 | 250 | Ama | ril | | | | |
| Becompletion | 1 1 | | | | | | |

Kelley Eisenberg
Engineering Assistant
(Title)

(Date)

October 21, 1980

NEW MEXICO OIL CONSERVATION COMMISSION

a + 2

Form C-104

| | SANTA FE | REQUEST F | REQUEST FOR ALLOWABLE | | Supersedes Old C-104 and C-110 Effective 1-1-65 | | | |
|--|---|---|--|------------------------------|--|-------------------|--|--|
| Γ | FILE | | AND | | | , | | |
| | u.s.g.s. | AUTHORIZATION TO TRAN | ISPORT OIL AND N | ATURAL GAS | | | | |
| Ī | LAND OFFICE | | | | | | | |
| | TRANSPORTER OIL | TRANSPORTER OIL | | | | | | |
| | GAS | | | | | | | |
| | OPERATOR | | | | | | | |
| 1. | PRORATION OFFICE | | | | | | | |
| | Operator | | | | | | | |
| L | Kerr-McGee Corporation Address | | | | | | | |
| | | | | | | | | |
| - | P O Box 250, Amarillo, TX 79189 Reason(s) for filing (Check proper box) New Weil XX Change in Transporter of: | | | | | | | |
| | | | | | | | | |
| | Dry Gas | | | | | | | |
| | Recompletion Change in Cwnership | Casinghead Gas Condens | sate 🗍 | | | | | |
| l | Change in Cwitership | | | | | | | |
| 1 | If change of ownership give name | | | | | | | |
| 1 | and address of previous owner | | | | | | | |
| | DESCRIPTION OF WELL AND L | FASE | | | | | | |
| 11. | Lease Name | Well No. Pool Name, Including Fo | rmation | Kind of Lease | | Lease No. | | |
| | State "F" | 14 Chaveroo-Sar | n Andres | State, Federal or Fe | e State | OG 1062 | | |
| | Location | | | | | | | |
| | Unit Letter C; 133 | Feet From The West Line | e and 1310 | Feet From The | North | | | |
| | Unit Letter, | | | | | | | |
| | Line of Section 2 Tow | mship 8S Range 33 | BE , NMPM | Ch: | aves | County | | |
| 1 | | | | | | | | |
| 111. | DESIGNATION OF TRANSPORT | TER OF OIL AND NATURAL GA | S Address (Give address t | o which approved co | ppy of this form is | to be sent) | | |
| | Name of Authorized Transporter of Oil | or Condensate | Address (Give address | | | | | |
| | Mobil Pipeline Compa | Iny Inghead Gas or Dry Gas | P O Box 900, I | o which approved co | opy of this form is | to be sent) | | |
| | Name of Authorized Transporter of Cas | P O Box 300, 3000FNT, Tulsa, OK 74102 | | | | | | |
| | Cities Service Oil C | | Is gas actually connected | | 3a, OK 741 | ¥ <u>~</u> | | |
| | If well produces oil or liquids, | | Yes | | ember 25, 1 | 980 | | |
| | give location of tanks. | | | | <u> </u> | | | |
| | If this production is commingled wit | h that from any other lease or pool, | give comminging order | number. | | | | |
| IV. | COMPLETION DATA | Oil Well Gas Well | New Well Workover | Deepen Plu | g Back Same Re | s'v. Diff. Res'v. | | |
| Designate Type of Completion - (X) X | | | | | | 1 | | |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.E | 3.T.D. | | | |
| | 8-17-80 | 10-2-80 | 4500' | | 4455 ' | | | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tuk | bing Depth | i | | |
| | 4366.1' GR | San Andres | 4185' | | 4176 th Casing Shoe | | | |
| | Perforations 4185, 4187, 4 | 191, 4197, 4201, 4207, 4 | 213, 4215, 4222 | , 4223 | • | | | |
| | 4229, 4232, 4259, 4287, 4290, 429 | ao 4004 4303 4311,43 <i>0</i> 1 43 <i>0</i> 5.4 | .3 <i>2</i> 9. 4334. 4339. 4344 | . 4349.4353 | 4499' | | | |
| | | 4313 FUBING, CASING, AND | CEMENTING RECOR | (b | SACKS CE | MENT | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTHS | ET | | 1012111 | | |
| | 12 1/4 | 8 5/8" 24#/ft K-55 | 410 | | 400 | | | |
| | 7_7/8 | 4 1/2" 10.5#/ft J-55 | 4499 | | 250 | | | |
| | | DV Tool in 4 1/2 csg | 1911 4176 | | 480 - | | | |
| | (OVER) | 2 3/8 | 41/0 | une of load oil and . | nust be equal to or | exceed top allow- | | |
| V. | . TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be a able for this de | ifter recovery of total vol epth or be for full 24 hour | inte of toda ott and n s) | | | | |
| | OIL WELL Date First New Oil Run To Tanks | Date of Test | Producing Method (Flo | w, pump, gas lift, et | c.) | | | |
| | | 10-16-80 | Pump | _ | | | | |
| | 9-19-80 | Tubing Pressure | Casing Pressure | Ch | oke Size | | | |
| | Length of Test | 0 | 35 | | None | | | |
| | 24 Hours Actua. Prod. During Test | Oil-Bbls. | Water-Bbls. | Go | ss-MCF | | | |
| | 14.3 | 14.3 | 81 | | 8.86 | | | |
| 17.0 | | | | | | | | |
| | GAS WELL | | | <u> </u> | | | | |
| | Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MM | ΣF Gr | ravity of Condensa | | | |
| | | Tubing Pressure (Shut-in) | Casing Pressure (Shu | | hoke Stre | | | |
| | hoke Size | | | | | | | |
| | Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Cdsing Pressure (Shut-in) | | | | | | | |
| CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION | | | | | | ON | | |
| • | | | | | 1/ | ., 19 | | |
| 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. | | | APPROVED | | | • | | |
| | | | | BY | | | | |
| | above is true and complete to the | · · · · · · · · · · · · · · · | ' // S ilt | | | | | |
| | | | TITILE | | | | | |

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 4185 - 100 sx C1 "C" squeeze 4156 - 100 sx C1 "C" squeeze