Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instructions at Bottom of Page

printe District Office SICT I 30x 1980, Hobbs, NM 88240

RICT II Drawer DD, Anesia, NM 88210

alór

RICT III Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No.

Kerr-McGee Corpo	oration	1										
ess									<u>—</u>			
P.O. Box 11050 on(s) for Filing (Check proper box)	Mid	lland,	TX 7	79702) 	XX Othe	r (Please expla	ini				
Well		Change in	Transpor	ter of:		ELL Cuie	Change :		porter			
mpletion	Oil		Dry Gas]		3		-			
ige in Operator	Casinghea	d Gas 🔽	Condens	ate []_							
inge of operator give name ddress of previous operator												
DESCRIPTION OF WELL	AND LE	ASE		-								
e Name Well No. Pool Name, Including						ng Formation Kind o			Lesse Fee	Le	ase No.	
					(Federal or Fee			
tion		_ 										
Unit Letter B	:66	50	_ Feet Fro	m The	No.	orth Line	and 1980	Fee	et From The _	East	Line	
Section 26 Township 7S Range 31E				:	. NM	TPM,	Chaves	County				
							, , , , , , , , , , , , , , , , , , , ,					
DESIGNATION OF TRAN				NAT	<u>rur</u>		address to the	ich anne	come of this f	m in to be co		
e of Authorized Transporter of Oil or Condensate antern Petroleum Company						Address (Give address to which approved copy of this form is to be sent) P.O. Box 2281 Midland, TX 79702						
e of Authorized Transporter of Casinghead Gas or Dry Gas						Address (Give address to which approved copy of this form is to be sent)						
rident NGL, Inc.						P.O. Box 50250 Midland, TX 79710						
ell produces oil or liquids, location of tanks.	Unit Sec.		Twp Rge		- 1	Is gas actually connected?		When	When ?			
production is commingled with that	G G		26 7S 31E			yes			11/79			
COMPLETION DATA	ion any ou	ivade UI	hor RIV	CAME	•m&rti	re orger naruo	~··					
Variance True of Co. 1 :	~	Oil Wel	1 C	ias Well		New Well	Workover	Deepen	Plug Back S	iame Res'v	Diff Res'v	
Sesignate Type of Completion			- P '			Total Death		<u></u>	<u> </u>			
Spudded Date Compl. Ready to Prod.						Total Depth P.B.T.D.						
ations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay			Tubing Depth	Tubing Depth		
prations									Depth Casing	Shoe		
	7	ITIRING	CASIN	JG AN	AD (CEMENTIN	VG RECOR	D	1			
HOLE SIZE CASING & TUBING SIZE						CEMENTING RECORD DEPTH SET			SACKS CEMENT			
		·										
					-							
TEST DATA AND REQUES									· · · · · · · · · · · · · · · · · · ·			
WELL (Test must be after r	T		of load o	il and n						r full 24 hou	rs.)	
First New Oil Run To Tank Date of Test						Producing Method (Flow, pump, gas lift, etc.)						
gth of Test	Tubing Pressure				Casing Pressu	ire		Choke Size				
al Prod. During Test Oil - Bbls.						Water - Bbls.	-		Gas- MCF			
C TYPY I	1								1			
IS WELL Ald Prod. Test - MCF/D	Length of	Test				Bbls. Conden	sate/MMCF		Gravity of Co	andeneste		
and the second s									Jierny or contourne			
g Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Press	ire (Shut-in)	<u>.</u>	Choke Size				
OPER + MOR CONT	1					<u> </u>						
OPERATOR CERTIFIC				ICE		• • •		ISFRV	ATION E	ועופור	N	
hereby certify that the rules and regul Division have been complied with and	that the info	ermation gi					0 0 1		L	,	· · ·	
s true and complete to the best of my						Date	Approve	d	i g F	TAL	i i	
$\left(\begin{array}{cccc} \lambda & \lambda \end{array}\right)$	\mathbb{R}	1—					pp.010	<u> </u>	· · · · · · · · · · · · · · · · · · ·		94	
lignature July	102	ner	<u>. </u>		-	∥ By_	ieria:	W Server	O 37 /52 0 1	SEXTON		
Ludy_Benton		Analy	st II		-			90.375.67	SUPERVISO	ją ją		
Tinted Name October 1, 1991		915/6	Title 588–70	30		Title				· · · · · · · · · · · · · · · · · · ·		
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Thiomptiomonic miles	•	<u> </u>						•				

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.