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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Ferm C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Kerr-McGee Corporation	
Kerr-McGee Bldg., Okla. City, Okla.	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Ownership name change effective 11-1-65
Improvements <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/>	
Dry Gas <input type="checkbox"/>	
Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner **Kerr-McGee Oil Industries, Inc., Kerr-McGee Bldg., Okla. City, Okla.**

Lease Name		Well No.	Pool Name, Including Formation	Kind of Lease
State E-7169		2	King Devonian	State, Federal or Fee State
Location				
Unit Letter	M	467	Feet From The South	Line and 467 Feet From The West
Line of Section	36	Township	13S	Range 37E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)	
Service Pipeline Co.			Box 337, Midland, Texas	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>			Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rce.
			Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
						X		
Date Spudded	Date Compl. Ready to Prod.		Total Depth		F.B.T.D.			
April 21, 1957			12,667		8500			
Pool	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
	None				12,667			
Perforations					Depth Casing Shoe			
None-Temporarily Abandoned								
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	13-3/8		360		350			
	8-5/8		4597		800			
	5-1/2		12667		750			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)			
Date First Flow Oil From To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Flow During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Flow Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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 _____, 19	
		BY _____	
		TITLE _____	
Prod. Supt (Title)		This form is to be filed in compliance with RULE 1104.	
1-18-66 (Date)		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 Sections I, II, III, and VI only 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.	