

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Chevron <i>ORXX Energy Co.</i> P. O. Box 1150 Midland, TX 79702		² OGRID Number 4323 <i>16587</i>
		³ Reason for Filing Code NW
⁴ API Number 30-015-28827	⁵ Pool Name INDIAN BASIN; UPPER PENN (PRO GAS)	⁶ Pool Code 79040
⁷ Property Code <i>17243</i>	⁸ Property Name BOGLE FLATS UNIT	⁹ Well Number 13

II. ¹³C Surface Location

UL or lot no.	Section	Township	Range	Lot, Idn	Feet from the	North/South Line	Feet from the	East/West line	County
A	17	22S	23E		1020	NORTH	750	EAST	EDDY

¹¹ Bottom Hole Location

1. U/L or lot no	Section	Township	Range	Lot, Idn	Feet from the	North/South Line	Feet from the	East/West line	County
A	17	22S	23E		1020	NORTH	750	EAST	EDDY
12 Use Code	13 Producing Method Code	14 Gas Connection Date	15 C-129 Permit Number	16 C-129 Effective Date	17 C-129 Expiration Date				
	F	03/26/96							

III. Oil and Gas Transporters

18 Transporter OGRID	19 Transporter Name and Address	20 POD	21 O/G	22 POD ULSTR Location and Description
14035 014305	MARATHON OIL COMPANY P.O. BOX 552 MIDLAND, TX 79702	2817431	0	A-17-22S-23E
14035 014305	MARATHON OIL COMPANY P.O. BOX 552 MIDLAND, TX 79702	2817432	G	A-17-22S-23E

Part ID 2
6-14-96
comp & BK

IV. Produced Water

23	POD	24	POD ULSTR Location and Description

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PRTD	²⁹ Perforations
02/24/96	03/26/96	7097'	6912'	
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	
12 3/4	9 5/8	1250	540 SX TAIL W/420 SX	
8 3/4	7	6957	150 SX TAIL W/110 SX	
	3 1/2 TUBING	6870		

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
03/29/96	03/29/96	04/10/96	24 HRS	290	0
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method
32/64	1	1	3022	N/A	

⁴⁶ I hereby certify that the rules 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.

Signature:

Printed name: _____

Title:

Date: 5-10-96

Phone: 214 715-4828

OIL CONSERVATION DIVISION

Approved by _____

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

Title:

Approval Date:

MAY 20 1996

^{4/} If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature _____

Printed Name: _____

Title

Date _____