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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

REQUEST FOR ALLOWARI F AND ALITHORIZATION

•					AND NAT		S					
Operator Chevron U.S.A. Inc.						Well Al 30-			M No. -025-26076			
Address		П	707	02								
P.O. Box 1150, M eason(s) for Filing (Check proper box)	idland,	Texas	797		△ Othe	(Please expla	uin)					
lew Well		Change in 7	Transports	∷ of:		•	Effec		te: 12/1	/90		
ecompletios	Oil		Dry Gas			11 name:						
hange in Operator X	Casinghead	Gas 🗌 (Condensa	te	Filed to	show Un	itizatio	on and (hange of	Operato		
change of operator give name d address of previous operator Amo	co Prod	uction	Co.,	P.O.	Box 3092	, Housto	n, Texas	s 77253	<u> </u>	-11		
. DESCRIPTION OF WELL	ANDIFA	CE.								•		
Eunice Monument South			Pool Nan	ne, Includi	ng Formation	ravburg		f Lease Federal of Ma		31736-A		
ocation	011200	L										
Unit LetterB	: 840		Feet From	n The _N	orth Lin	and _2080	Fee	et From The .	East	Line		
Section 24 Township	20S		Range	36E	, NI	(PM, ^L	.ea			County		
I. DESIGNATION OF TRAN	SPORTE	R OF OI	L AND	NATU	RAL GAS							
ame of Authorized Transporter of Oil						Address (Give address to which approved copy of this form is to be sent)						
Shell Pipeline					Box 1910, Midland, Tx. 79701							
ame of Authorized Transporter of Casing Phillips 66 Natural		X	or Dry G	Dry Gas	Address (Give address to which approved 4001 Penbrook, Odessa							
well produces oil or liquids,		Sec.	Twp.	Rge.	le gas actuall		When					
re location of tanks.	В	24		36E	Yes				_			
his production is commingled with that i	from any oth	er lease or p	cool, give	commingi	ing order numi	er:	N.A.					
. COMPLETION DATA		·,			1			· ·	<u> </u>			
Designate Type of Completion	- <i>(</i> X)	Oil Well	G	is Weil	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
		mpl. Ready to Prod.			Total Depth			P.B.T.D.				
evations (DF, RKB, RT, GR, etc.)	, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth				
erforations ·								Depth Casing Shoe				
	T	UBING,	CASIN	G AND	CEMENTI							
HOLE SIZE	CAS	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	<u> </u>				 							
								 -				
		· - .										
TEST DATA AND REQUES	T FOR A	LLOWA	BLE		<u></u>							
IL WELL (Test must be after r	ecovery of to	tal volume o	of load oi	il and must	be equal to or	exceed top all	lowable for thi	is depth or be	for full 24 hou	F3.)		
ate First New Oil Run To Tank	Date of Tes	a			Producing M	ethod (Flow, p	ump, gas igt,	esc.)				
at Total	Tubing Brown			Casing Pressure			Choks Size					
ength of Test	Tubing Pressure											
ctual Prod. During Test					Water - Bbis.			Gas- MCF				
					<u></u>		·	1				
GAS WELL												
ctual Prod. Test - MCF/D	Leagth of Test			Bbls. Condensate/MMCF			Gravity of Condensate					
				Casing Pressure (Shut-in)			Choke Size					
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Cating Pressure (Sinu-tar)								
	<u> </u>	. CO1 E	7 7 4 2 7	CE	-		· · · · · · · · · · · · · · · · · · ·					
L OPERATOR CERTIFIC				CE	-	OIL CO	NSERV	'ATION	DIVISION	NC		
I hereby certify that the rules and regul Division have been compiled with and	that the info	rmetica givi	es apove						0404	രാഗ		
is true and complete to the best of my	imowiedge a	nd belief.			Date	Approvi	ed]]+	C 181	<u> </u>		
An 11								Orig. Dig	ned My			
d.M. Bohon					∥ By_			Paul K	autz			
Signature D.M. Bohon Te	chnical	Assis	tant				• £	7 Paco10	RTD#.			
Printed Name		015) (Title	/. O	Title							
12/6/90 Date	(915) 68	8/-/1 ephone N									
L'ets		1 216	., .									

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.