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Appropriate District Office
DISTRICT 1
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

DISTRICT II P.O. Drawer DD, Antenia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

I. Operator	REC	UEST	FOF PAN	ALLO SPORT	WA CO	ABLE AND	AUTHOR	RIZATIC GAS	N			
							Well API No.					
Chevron U.S.A. Inc.							30-025-08783					
P.O. Box 1150, Midla: Reason(s) for Filing (Check proper box)	nd, TX	79702										
New Well		Change	ie Te	unsporter o	e.	□ 0	ther (Please ex	plain)		 		
Recompletion X	Oii		-	y Gas								
Change in Operator	Casinghe	ad Gas	_ `	onden sate	$\bar{\Box}$							
If change of operator give name and address of previous operator					_	· · · · · · · · · · · · · · · · · · ·			·			
IL DESCRIPTION OF WELL	ANDLE	TACE										
Lease Name	70.10 00	Well No. Pool Name, Includ				ling Formation	<u> </u>	K	ind of Lease		ease No.	
J. F. Janda (NCT-F)	16 Jalmat				-			ate, Rederal or Res				
Location		0.0										
Unit LetterH	_:19	80	_ Fee	t From Th	• _1	North L	ne and _660	•	Feet From The	East	Line	
Section 4 Township 22S Range 36E						Na don a la l						
Towns	220		K	age JOE			IMPM, I	Lea			County	
III. DESIGNATION OF TRAN	SPORTE	ER OF C	IL A	AND NA	TU	RAL GAS						
Name of Authorized Transporter of Oil		or Conde						vhich appro	ved copy of this form	is to be se	ent)	
N.A.												
Name of Authorized Transporter of Casin Northern Natural Gas					Address (Gi	ve address to w	hich appro	ved copy of this form	copy of this form is to be sent)			
If well produces oil or liquids,				D					or, Omaha, NE 68102			
rive location of tanks.	l Clar	3ec 	1 1 1 1	P	Rge.	Yes	ly connected?	j Wi	sen 7 4/2/91			
f this production is commingled with that	from any ou	ber lease or	pool,	zive com	nine		ber:		4/2/91		 -	
V. COMPLETION DATA	•											
Designate Type of Completion	- (X)	Oil Wel	1	Gas We	:II	New Well	Workover	Deeper		me Res'v	Diff Res'v	
Date Sauddack Workover began	· · · · · · · · · · · · · · · · · · ·					Total Depth		ــــــــــــــــــــــــــــــــــــــ	P.B.T.D.			
1/25/91	1/31/91				3875.				3560'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay				Tubing Depth			
3584' GR	Jalmat				3502'				3096'			
Perforations										Depth Casing Shoe		
3502'-3162'			, .						3875'			
	TUBING, CASING AND											
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
12 1/4" 7 7/8"	8 5/8" #24 5 1/2" #14					400'				325sx Circ		
/ //8	2 3/8" Tbg.				3875' 3096'			925sx	925sx TOC@40' by TS			
	2 3/0 10g.				3090							
. TEST DATA AND REQUES	T FOR A	LLOW	ÄBL	E								
IL WELL (Test must be after re	covery of to	eal volume	of los	id oil and	must	be equal to or	exceed top alle	owable for t	this depth or be for f	idl 24 how	rs.)	
Date First New Oil Run To Tank	Date of Te	đ				Producing Me	ethod (Flow, pa	ump, gas lif	, etc.)			
												
ength of Test	Tubing Pre	Tubing Pressure				Casing Press.	ite		Choke Size			
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas- MCF	Gas- MCF				
schal flor During 100												
O LO TENTE	<u>l</u>								<u>. , I </u>			
GAS WELL Actual Prod. Test - MCF/D	II amerik ad '	io-d				Bbls. Conden	AAAACE	 	Gravity of Cond	encale	 -	
668 mcf/d	Length of Test 24 hr				0			1 -	N.A.			
esting Method (pitot, back pr.)	Z4 nr Tubing Pressure (Shut-in)				Casing Press	re (Shut-in)		Choke Size				
Back Pressure	162 psi				0			34/64				
T. OPERATOR CERTIFICA			TIA	NCE	\dashv							
							DIL CON	ISER\	/ATION DI	VISIO	N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above									\$ \$4.50°	O Ac	en a	
is true and complete to the best of my knowledge and belief.						Date Approved APK 0 9 1991						
D. M. Bohon		•					· · F F · · · · ·					
Signature						Bv_	$\mathcal{C}(\mathbb{R}^{n-1})$			KON		
D.M. Bohon Technical Assistant						-, <u>-</u>					- 	
Printed Name 4/4/91			Title		-	Title			··			
	<u>(915)</u> (No	-	"""						
Date		Tele	phone	NO.								

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.