P. 0. Drawer 217, Artesia, NM 88210         Recon(s) for filing (Check proper box)         New Weil       Change in Transporter of:         Recompletion       Oil         Dry Gas       Ownership change effective         Change in Ownership       Casinghead Gas         change of ownership give name       Chevron U.S.A., Inc. P. O. Box 670, Hobbs, NM 88240         Locotion       DESCRIPTION OF WELL AND LEASE         Lease Name       Weil No. Pool Name, Including Formation         Square Lake "12" Unit       /C9         Square Lake Grayburg S-A       State, Federal or Fee Fed         Of 148:       Of Condensate         Locotion       Township         Unit Letter       G         J       Township         O' Condensate       NMPM,         Line of Section       O' Condensate         Name of Authorised Transporter of Cli or Condensate       o' Condensate         Name of Authorised Transporter of Cliege or Condensate       P. O. Box 1510, Midland, TX 79701         Name of Authorised Transporter of Classphead Gas or Dry Cas       Address (Give address to which approved copy of this (orm is to be sent)				RECEIDO	
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Name of Authorized Transporter of Casinghead Gas D or Dry Gas Address (Give address to which approved copy of this form is to be sent) Continental Oil Company P. O. Box 2197, Houston, TX 77000 Port II well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When 10-2-2	Change of ownership give nameChange of ownership give nameChange of previous ownerChange	IEVRON U.S.A., Inc. P. LEASE Well No. Pool Name, Including F /09 Square Lake Gr D Feet From The 7000000 Lir whip 175 Range RTER OF OIL AND NATURAL	0. Box 670, Hobbs formation Ki rayburg S-A Sta ne and <u>/980</u> F 296 , NMPM, L GAS	, NM 88240 hd of Lease ite, Federal or Fee "eet From The $\underbrace{\mathcal{L}}$	Fed 06148 aut Ettiy cour
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If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When 10-9-	Change of ownership give nameCh nd address of previous ownerCh I. DESCRIPTION OF WELL AND Leose Name Square Lake "12" Unit Location Unit LetterG: Line of Section /2Towns II. DESIGNATION OF TRANSPO Name of Authorized Transporter of Cli [2] Texas New Mexico Pipelin	IEVRON U.S.A., Inc. P. LEASE Well No. Pool Name, Including F 109 Square Lake Gr Peet From The <u>1000000000000000000000000000000000000</u>	0. Box 670, Hobbs ormation Ki ayburg S-A. Sta ne and <u>/980</u> F <u>296</u> , NMPM, LGAS Address (Give address to w P. O. Box 1510,	NM 88240	Fed 06148 <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u>06148</u> <u></u>
I well produces oil or liquids,	Change of ownership give nameChange of previous ownerChange of authorized Transporter of Cill (y) Texas New Mexico Pipelir Name of Authorized Transporter of Casim	IEVRON U.S.A., Inc. P. LEASE Well No. Pool Name, Including F 109 Square Lake Gr Peet From The <u>1000000000000000000000000000000000000</u>	0. Box 670, Hobbs ormation Ki ayburg S-A Sta ne and <u>1980</u> F 290 , NMPM, LGAS Address (Give address to w P. 0. Box 1510, Address (Give address to w	NM 88240	Fed 06148 1. t Exting Court his form is to be sent) 79701 his form is to be sent)
references r 12 1/5 29E yes April, 1961 che en	Continental Oil Company	IEASE         Well No.       Pool Name, Including F         IOG       Square Lake Gr         Peet From The       IOG         Peet From The <td>0. Box 670, Hobbs ormation Ki ayburg S-A. Sta ne and <u>/980</u> F 290 , NMPM, LGAS Address (Give address to w P. 0. Box 1510, Address to w P. 0. Box 2197,</td> <td>NM 88240</td> <td>Fed 06148 0.1 0.1 0.1 0.1 0.1 0.1 0.1 0.1</td>	0. Box 670, Hobbs ormation Ki ayburg S-A. Sta ne and <u>/980</u> F 290 , NMPM, LGAS Address (Give address to w P. 0. Box 1510, Address to w P. 0. Box 2197,	NM 88240	Fed 06148 0.1 0.1 0.1 0.1 0.1 0.1 0.1 0.1
	I change of ownership give name	LEASE Well No. Pool Name, Including F ///9 Square Lake Gr D Feet From The //0/1/ Lir whip //75 Range RTER OF OIL AND NATURAN or Condensate the Co. ghead Gas or Dry Gas Init Sec. Twp. Rge.	0. Box 670, Hobbs ormation Ki ayburg S-A. Sta ne and <u>/ 980</u> F 290 , NMPM, LGAS Address (Give address to w P. O. Box 1510, Address (Give address to w P. O. Box 2197, 15 gas actually connected?	NM 88240	Fed 06148 06148 06148 06148 06148 000 000 000 000 000 000 000 0

## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

10 < 20 > (Date)

	Original				, 19	
APPROVED	OCT	5	1987			
OIL	CONSERVAT	TIO.	N DIVIS	SION		

BY	Unginal Signed By
	Mike Wiiliams
	TATIVO AATURUUS
TITLE	

This form is to be filed in compliance with RULE 1104.

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 only Sections I. II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forma C-104 must be filed for each pool in multiply completed wells.

Form C-104 Revised 10-01-78 Format 06-01-83 Page 2

## IV. COMPLETION DATA

Designate Type of Completi	on - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Res'v.
Date Spudded		. Ready to Pro		Tatal Depth	i	_i	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Forma	tion	Top Oil/Ga	s Pay		Tubing Dep	th	
Perforations				<u> </u>			Depth Casir	ng Shoe	
		TUBING, C	ASING, AN	DCEMENTI	NG RECOR	>			
HOLESIZE	CASIN	NG & TUBIN	GSIZE		DEPTH SE	<u>т</u>	S/	CKS CEMEN	17
								······	
		· · · · · · · · · · · · · · · · · · ·							· · · · · · · · · · · · · · · · · · ·

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-OIL WELL able for this depth or be for full 24 hours)

Date First New Oli Run To Tanks	Date of Test	Producing Method (Flow, pump, ges lift, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	О(1- Выя.	Water - Bbls.	Gas - MCF	

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Teeting Method (pitot, back pr.)	Tubing Pressure ( Shnt-is )	Casing Pressure (Faut-in)	Choke Size