

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

Form C-101
 Superseded by OAC 101 and C-11
 Effective 1-1-85

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DEPARTMENT	
SANITARY	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PROBATION OFFICE	

Operator Chevron U.S.A. Inc.

Address P.O. Box 670 Hobbs N.M. 88240

Reason(s) for filing (check proper box)

New Well Reenter Prod Well Change in Transporter of Oil Oil Dry Gas Casinghead Gas Condensate

Other (Please explain) **CASINGHEAD GAS MUST NOT BE PLACED AFTER 9/1/85 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.**

change of ownership give name and address of previous owner Gulf Oil Corp, P.O. Box 670, Hobbs, NM 88240

DESCRIPTION OF WELL AND LEASE

THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW IF YOU ARE A PRODUCER OF THIS INFORMATION

Lease Name Lea "CR" State (N.M.A.) Well No. 2 Production Lease Information 11. Anderson Ranch Cisco Canyon of Lease State Lease No. E-3510

Unit Letter 0 ; 3300 Feet From The South Line and 1980 Feet From The East Line

Line of Section 2 Township 16-S Range 32E N.M.P.U. Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Permian Corp. Address (Give address to which approved copy of this form is to be sent) Box 3119 Midland, TX 79701

Name of Authorized Transporter of Casinghead Gas or Dry Gas Conoco Address (Give address to which approved copy of this form is to be sent) Box 460, Hobbs, NM 88240

Well produces oil or liquids, give location of tanks. 0 Unit 2 Sec. 16S Twp. 32E Pgc. No Is gas actually collected? No when

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Stim Res.	Partial Test
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Date Spudded 6-19-85 Date Compl. Ready to Prod. 6-30-85 Total Depth 13,363' P.B.T.D. 11,090'

Deviations (DF, RKB, RT, CR, etc.) 4271' GK Name of Producing Formation Cisco Canyon Top Oil/Gas Pay 10,477' Tubing Depth

Perforations 10,477-84' Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>8 1/2"</u>	<u>5 1/2"</u>	<u>6250'</u>	<u>300</u>

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 allowable for this depth or be for full 24 hours)

DATE FIRST NEW OIL RUN TO TANKS 6-30-85 Date of Test 7-1-85 Producing Method (flow, pump, gas lift, etc.) Flow

Length of Test 24 hr Tubing Pressure 255# Casing Pressure - Choke Size 2 4/64

Actual Prod. During Test 434 Oil - Bbls. 392 Water - Bbls. 42 Gas - MCF 560

AS WELL

Actual Prod. Test - MCF/D 434 Length of Test 24 hr Bbls. Condensate/MCF 560 Gravity of Condensate

Casing Method (pilot, back pr.) - Tubing Pressure (shut-in) 255 Casing Pressure (shut-in) - Choke Size 2 4/64

CERTIFICATE OF COMPLIANCE

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.

R.D. Pate
 (Signature)
AREA ENGINEER
 (Title)
7-2-85
 (Date)

OIL CONSERVATION COMMISSION
JUL - 3 1985

APPROVED _____, 19____

BY JERRY SEXTON
 DISTRICT I SUPERVISOR

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 production 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 re-completed 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.