

District I  
 PO Box 1980, Hobbs, NM 88241-1980  
 District II  
 PO Drawer DD, Artesia, NM 88211-0719  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
 En. , Minerals & Natural Resources Department

Form C-104  
 Revised October 18, 1994  
 Instructions on back  
 Submit to Appropriate District Office  
 5 Copies

**OIL CONSERVATION DIVISION**  
**2040 South Pacheco**  
**Santa Fe, NM 87505**

AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address Chevron U.S.A. Inc. P.O. Box 1150 Midland, TX 79702		<sup>2</sup> OGRID Number 4323
<sup>4</sup> API Number 30-0 30-025-29600	<sup>5</sup> Pool Name EUNICE MONUMENT; GRAYBURG-SAN ANDRES	<sup>3</sup> Reason for Filing Code CG EFFECTIVE 7/1/98
<sup>7</sup> Property Code 2616	<sup>8</sup> Property Name EUNICE MONUMENT SOUTH UNIT	<sup>6</sup> Pool Code 23000
		<sup>9</sup> Well Number 311

**II. <sup>10</sup> Surface Location**

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
I	11	21S	36E		2080	SOUTH	460	EAST	LEA

**<sup>11</sup> Bottom Hole Location**

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County

<sup>12</sup> Lse Code P	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date 2/1/92	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date
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**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> POD	<sup>21</sup> O/G	<sup>22</sup> POD ULSTR Location and Description
001009	ARCO PIPELINE CO. P. O. BOX 308 INDEPENDENCE, KS 67301	0715610	0	P-06-21S-36E
037480	EOTT ENERGY PIPELINE LP P. O. BOX 4666 HOUSTON, TX 77210-4666	2806541	0	P-06-21S-36E
024650	DYNEGY MIDSTREAM SERVICES, LP 1000 LOUISIANA, SUITE 5800 HOUSTON, TX 77002-5050	2815419	G	L-11-21S-36E
009171	GPM CORP. 4044 PENBROOK ODESSA, TX 79762	2815420	G	L-11-21S-36E

**IV. Produced Water**

<sup>23</sup> POD 0715650	<sup>24</sup> POD ULSTR Location and Description
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**V. Well Completion Data**

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBSD	<sup>29</sup> Perforations	<sup>30</sup> DHC, DC, MC

<sup>31</sup> Hole Size	<sup>32</sup> Casing & Tubing Size	<sup>33</sup> Depth Set	<sup>34</sup> Sacks Cement

**VI. Well Test Data**

<sup>35</sup> Date New Oil	<sup>36</sup> Gas Delivery Date	<sup>37</sup> Test Date	<sup>38</sup> Test Length	<sup>39</sup> Tbg. Pressure	<sup>40</sup> Csg. Pressure

<sup>41</sup> Choke Size	<sup>42</sup> Oil	<sup>43</sup> Water	<sup>44</sup> Gas	<sup>45</sup> AOF	<sup>46</sup> Test Method

<sup>47</sup> 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: *J. K. Ripley*  
 Printed name: J. K. RIPLEY  
 Title: TECHNICAL ASSISTANT  
 Date: 11/24/98 Phone: (915)687-7148

<b>OIL CONSERVATION DIVISION</b>			
Approved by:			
Title:			
Approval Date:			

<sup>48</sup> 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

**OIL CONSERVATION DIVISION**  
**PO Box 2088**  
**Santa Fe, NM 87504-2088**

AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator Name and Address <b>Chevron U. S. A., Inc.</b> <b>P. O. Box 1150</b> <b>Midland, TX 79702</b>		<sup>2</sup> OGRID Number <b>4323</b>
		<sup>3</sup> Reason for Filing Code <b>New Gas POD's; Delete Previous Gas POD's</b>
<sup>4</sup> API Number <b>30 - 025 - 29600</b>	<sup>6</sup> Pool Name <b>Eunice Monument G-SA</b>	<sup>8</sup> Pool Code <b>23000</b>
<sup>7</sup> Property Code <b>2616</b>	<sup>8</sup> Property Name <b>Eunice Monument South Unit</b>	<sup>9</sup> Well Number <b>311</b>

**II. <sup>10</sup> Surface Location**

Ul or Lot. No.	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet from the	East/West Line	County
<b>I</b>	<b>11</b>	<b>21S</b>	<b>36E</b>		<b>2080</b>	<b>South</b>	<b>460</b>	<b>East</b>	<b>Lea</b>

**<sup>11</sup> Bottom Hole Location**

Ul or Lot. No.	Section	Township	Range	Lot Idn.	Feet from the	North/South Line	Feet from the	East/West Line	County
<sup>12</sup> Lse Code <b>P</b>	<sup>13</sup> Producing Method Code <b>P</b>	<sup>14</sup> Gas Connection Date <b>2/1/92</b>	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> POD	<sup>21</sup> O/G	<sup>22</sup> POD ULSTR Location and Description
<b>024650</b>	<b>Warren Petroleum</b> <b>P.O. Box 1589, Tulsa, OK 74102</b>	<b>2815419</b>	<b>G</b>	<b>L-11-21S-36E</b>
<b>009171</b>	<b>GPM Corp.</b> <b>4001 Penbrook, Odessa, TX 79762</b>	<b>2815420</b>	<b>G</b>	<b>L-11-21S-36E</b>

**IV. Produced Water**

<sup>23</sup> POD	<sup>24</sup> POD ULSTR Location and Description

**V. Well Completion Data**

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBSD	<sup>29</sup> Perforations
<sup>30</sup> Hole Size	<sup>31</sup> Casing & Tubing Size	<sup>32</sup> Depth Set	<sup>33</sup> Sacks Cement	

**VI. Well Test Data**

<sup>34</sup> Date New Oil	<sup>35</sup> Gas Delivery Date	<sup>36</sup> Test Date	<sup>37</sup> Test Length	<sup>38</sup> Tbg. Pressure	<sup>39</sup> Csg. Pressure
<sup>40</sup> Choke Size	<sup>41</sup> Oil	<sup>42</sup> Water	<sup>43</sup> Gas	<sup>44</sup> AOF	<sup>45</sup> Test Method

<sup>46</sup> 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: *J. K. Ripley*  
Printed Name: **J. K. Ripley**  
Title: **T.A.**  
Date: **7/26/95** Phone: **(915)687-7148**

**OIL CONSERVATION DIVISION**  
Approved by: \_\_\_\_\_  
Title: \_\_\_\_\_  
Approved Date: **AUG 09 1995**

<sup>47</sup> 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

Submit 5 Copies  
 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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
 TO TRANSPORT OIL AND NATURAL GAS**

**I.**

Operator <b>Chevron U.S.A., Inc.</b>	Well API No. <b>30 - 025-29600</b>
Address <b>P. O. Box 1150, Midland, TX 79702</b>	
Reason (s) for Filling (check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	
If chance of operator give name and address of previous operator	

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>Eunice Monument South Unit</b>	Well No. <b>311</b>	Pool Name, Including Formation <b>Eunice Monument</b>	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <b>I</b> : <b>2080</b> Feet From The <b>South</b> Line and <b>460</b> Feet From The <b>East</b> Line Section <b>11</b> Township <b>21S</b> Range <b>36E</b> , NMPM, Lea County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
<b>EOTT Oil Pipeline Co., ARCO, Texas New Mexico Pipeline</b>	<b>P.O. Box 4666, Houston, TX 77210-4666, Suite 2604</b>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
<b>EOTT Energy Pipeline LP</b> Effective 4-1-94	Unit	Sec.	Twp.	Rge.
Is gas actually connected?	When?			
<b>Yes</b>	<b>Unknown</b>			

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

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plugback	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P. B. T. D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Peforations						Depth Casin; g		
<b>TUBING, CASING AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

**V. TEST DATA AND REQUEST FOR ALLOWABLE**

**OIL WELL** (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 Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

**GAS WELL**

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back press.)	Tubing Pressure (Shut - in)	Casing Pressure (Shut - in)	Choke Size

I hereby certify that the rules and regulations 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.

*J. K. Ripley*  
 Signature  
**J. K. Ripley** T.A.  
 Printed Name  
**12/8/93** Title  
 Date (915)687-7148  
 Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved **FEB 03 1994**

By **ORIGINAL SIGNED BY JERRY SEXTON**  
 Title **DISTRICT I SUPERVISOR**

**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.
- 4) Separate Form C - 104 must be filed for each pool in multiply completed wells.

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Submit 5 Copies  
 Appropriate District Office  
**DISTRICT I**  
 P. O. Box 1980, Hobbs, NM 88240  
**DISTRICT II**  
 P. O. Drawer DD, Artesia, NM 88210  
**DISTRICT III**  
 1000 Rio Brazos Rd., Aztec, NM 87410

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 Energy, Minerals and Natural Resources Department

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Location				
Unit Letter <b>I</b>	: <b>2080</b>	Feet From The <b>South</b>	Line and <b>460</b>	Feet From The <b>East</b> Line
Section <b>11</b>	Township <b>21S</b>	Range <b>36E</b>	N.M.P.M.	Lea County

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil or Condensate <b>EOTT Oil Pipeline Co., ARCO, Texas New Mexico Pipeline</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 4666, Houston, TX 77210-4666, Suite 2604</b>					
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected ?	When ?
					<b>Yes</b>	<b>Unknown</b>

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

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plugback	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P. B. T. D.			
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Peforations					Depth Casin; g			
<b>TUBING, CASING AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

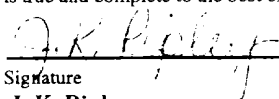
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