Form 3160-4 (October 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR OCD-HOBBS BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No 1004-0137

NIENT ODIO				O OI LAN	YD MANAGEN	AEN I			-	chires Decen	nder 31, 19	3 91		
SUBMIT ORIGINAL WITH 5 COPIES									5 Lease Designation and Serial No					
WELL COMPLETION OR RECOMPLETION REPORT AND LOG*									LC 032650B , 6 If Indian, Alottee or Tribe Name					
a Type of Well			GAS	DRY										
1b Type of Completion WELL WELL									7 If Unit or CA, Agreement Designation 8 Well Name and Number 6 29 1011					
WELL OVER N BACK RESVR								A B. COATES 'C'						
Name of Operat		CHEVR	ON US	SA INC						(A)	ъ.	P 4		
Address and Tel	ephone N	lo 15 SMI	TH RD	, MIDLAND	, TX 79705		432.6	87-737	9 API Well No	-	00	6 0 5		
Location of Well	(Report I				vith any State requi	rements *)		31-131		30-025				
At Surface Joint Letter O : 330 Feet From The SOUTH Line and 1650 Feet From The EAST Line									10 Field and Pool, Exploaratory Area LANGLIE MATTIX 7 RVR QN. GRAYBURG					
proposed prod z	one								11 SEC,T,R			y opared Co		
t Total Depth					44.5				Sec 24,	Township	25S,	Range 37E		
					14 Permit N	0	Date Issued		12 County or Pa	arish	13 Stat	е		
Date Spudded	16	Date T.D. Reached 17		17 Date	Compl (Ready to I	Prod)	18 Elevations (Show wh		LEA nether DF,RT, GR, etc)		NM 19 Elev Casinhead			
7/28/2007	0. F. (5)				7/5/2007			,5110W WII	emer DF,R1, GR,	etc)	19 Ele	✓ Casinhead		
Total Depth, MD 5650'			47	D, MD & TV 734'			How Many*	23 Inter Drilled E		ols	CableToo	ols		
. Producing Intervi 94-3534' GRAYBU	al(s), Of T JRG	This Complete	on – Top	o, Bottom, Na	me (MD and TVD))*				25. Was Dr	I irectional S	Survey Made		
Type Electric and		oas Run									No			
), ======	L	-90 (70))								27 Was We	ell Cored			
				CA	SING RECOR	 RD (Ren	ort all Strings	sat in	voll)		No			
CASING SIZE & GR	ADE	WEIGHT	ΓLB /FT		DEPTH SET	(1 topt	HOLE SIZE			RECORD	1 1	JAIT DUVE ST		
						change		CEMENT RECORD		AMO	UNT PULLED			
									+		 			
											 			
				VED DES										
SIZE		ТОР		NER RECOI		EMENIT T		30		TUBING R	ECORD			
					A SACKS CEMENT		SCREEN		SIZE	DEPTH SET		PACKER SE		
			-					2 7/	/8"	3256'				
Perforation recor							32 ACID,	<u>l</u> , SHOT.	FRACTURE, C	EMENT C	OUFF7E	ETC		
94-98, 3312-17, 33 55-57, 3470-80, 34	336-43, 3 185-89, 3	351-55, 3377- 493-96, 3505	82, 340!	5-08, 3428-37	', 3442-49,		DEPTH INTER	RVAL		T AND KIND				
•		100 00, 0000	14, 551	1-20, 3321-34	,	Ĺ	3294-3534'			GALS 15% HCL ACID				
						ŀ								
		=												
ate First Production		Production A	Method (I	Flowing, can I		UCTION								
7/1	5/2007	PUMPING	1 1/2"	oming, yas i	lift, pumping - size	and type p	ump)			Well Statu	us (Prod. o	r Shut-in)		
te of Test 26-07	Hours to		Choke	Size	Prod'n For Test Period	Oíl - 8b	Ol Ga	as - MCF	Water -		Gas - O	Il Ratio		
w Tubing Press		ing Pressure		Calculated 2 Hour Rate	24- Oil - Bbl		Gas - MCF	- V	valer - Bbi	Oil Grav	1ty - AP1 -((corr.)		
Disposition of Ga	s (Sold, ı	ised for fuel, v	ented, e	etc)					ACCEPTE	THESSELL BY	RECC	אָט		
List of Attachmen	ts					-			/\$/ D	AVIC) R.	GLA:		
I hereby certify that the fo	regoing is to	ue and correct					·		SEI	132	2007			
/ \	gard	21 4.7 4	nki	y DO	TITLE R	egulato	ry Specialist					+		
							, - p		-			piorond-		
PE OR PRINT NA	ME	[Denise	e Pinkerto	'n					TEUM ENGL	ASS	8/8/2007		

<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88241-1980

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised February 10,199

DISTRICT II P.O Box Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION P.O. Box 2088

Instructions on bac Submit to Appropriate District Offic 5 Copie

DISTRICT III 1000 Rio Brazos Rd , Aztec, NM 87410 <u>DISTRICT IV</u> P.O. Box 2088, Santa Fe, NM 87504-2088

Santa Fe, New Mexico 87504-2088

☐ AMENDED REPORT

I.		REQ	UEST FO	R ALLOV	NABLE	AND A	UTHORI	ZATION	N TO TRANSPO						
	¹ Operator Name and Address								OGRID Number 4323						
CHEVRON			•	3 Reason for Filing Code											
15 SMITH R	D, TX 79705			KTP RC 7-26-07											
⁴ API Number ⁵ Poo 30-025-21427 LANGLIE MATTIX							il Name K 7 RVR QN GRAYBURG				⁶ Pool Code 37240				
⁷ Property Code ⁸ Pro							pperty Name 9 Well No								
	1897					A.B. COA	ATES 'C'	re a	eral			26			
II. 10 Surfac	Surface Location								Feet From The	East/West Line County					
0	24	25S	37E					uth Line ITH	1650		EAST LEA				
	n Hole Loc	ation					T		[
UI or lot no.	Section	Township	Range	Lot.ldn	Feet F	rom The	North/So	uth Line	Feet From The	East	/West Line	County			
12 Lse Code F	13 Producing	Method Code	14 Gas Conn 1/1	ection Date 7/1992	15 C	-129 Permit	Number	16	C-129 Effective Date		¹⁷ C-129	Expiration Date			
III. Oil and	d Gas Tran	sporters													
18 Transpor	ter		ansporter Name	9		²⁰ POD)	²¹ O/G		POD ULSTR Location and Description					
	34053			PLAINS				0	A.B. COATES C-D FAC LEA COUNTY, NM						
024650			TARGA	24757	2475730 G		METER #161-213136								
										<u>-</u>		14			
										6	6618910	11/2/3/8/5			
										, - 0	AUG	2007			
										31-1	Rece	ived 👼			
IV. Produc	ed Water									100	00				
23	POD					²⁴ PO	D ULSTR L	ocation and	d Description		⁶ 82/2979	242617			
V. Well C	ompletion	Data													
²⁵ Spud Date 6/28/2007		2	²⁶ Ready Date 7/5/2007			²⁷ Total Depth 5650'			²⁸ PBTD 4734'		²⁹ Perforations 3294-3534'				
1	30 HOLE SIZE		31 CASING & TUBING SIZ								33 SACKS CEMENT				
no change															
									•						
171						<u> </u>									
	est Data	35 Cas Dali	von Date	36	unto of Too		37 Length	of Test	38 Tubing Pr	ossure.	³⁹ Ca	sing Pressure			
7/26/2007		7-1	7-15-07 7-26-07				³⁷ Length of Test 24 HRS ⁴³ Gas - MCF		Tubing Pressure						
⁴⁰ Choke Size ⁴¹ O		Q11 -	ıl - Bbis.				⁴³ Gas	- MCF 3	AOF Test Method P						
Division hav	e been complie	s and regulations of d with and that the dest of my knowled	information giver					OIL (CONSERVA	TIOI	N DIVISI	ON Y ,			
Signature ₂	Sem	iw Pr	nKert				Approve	и ву: ГО	R RECO						
Printed Nam	ne Der	nise Pinkerton					Title:								
Title Regulatory Specialist							Approval	Date:_	[[CT	1 0 2007	<u></u>			
	/8/2007		Telephor		32-687-73					*					
47 If this is a c	hange of operal	or fill in the OGRID	number and na	me of the prev	rious operate	or				·					
	Previous	s Operator Sig	nature	Printe	d Name					Title		Date			