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Ind address of previous owner       Image: None Sec 33       Well No. Pool Name, including Formation       Kind of Lease         In DESCRIPTION OF WELL AND IEASE       State, Federal or Fee       State, Federal or Fee       State         Haley Chaveroo SA Unit_       3       Chaveroo San Andres       State, Federal or Fee       State         Unit Leiter		Freviously Nº AZ State #3
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Line of Section       33       Township       7       South       Range       33       East       NMPM,       Roosevelt       C         MI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Cill       Or Condensate       Address (Give address to which approved copy of this form is to be sent         Mobil       Pipeline       Company       P. O. Box 900, Dallas, TX 75221         Name of Authorized Transporter of Cosinghead Gas (2)       or Dry Gas       Address (Give address to which approved copy of this form is to be sent         Mobil       P. O. Box 300, Tulsa, OK 74102       P. O. Box 300, Tulsa, OK 74102         If well produces eil or liquids.       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When         give lacention of tensts.       E       133       TS       132E       Yes       6/6/f6         If this production is commingled with that from any other lease or pool, give commingling order number:       NOTE:       Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE       It has form is to be filled in compliance with Rule 110A, the difference?         Medina K. Hickman (Signetuce?)       Production Supervisor       The form must be accordanced with such accordance with Rule 111A, this is a request for allowable for a newily drilled or de well, this form must be filled out completely f		•
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Cill S       or Condensate         Mobil Pipeline Company       P. O. Box 920. Dallas. TX 75221         Name of Authorized Transporter of Cesinghead Ges S       or Dry Gez         Name of Authorized Transporter of Cesinghead Ges S       or Dry Gez         Name of Authorized Transporter of Cesinghead Ges S       or Dry Gez         Name of Authorized Transporter of Cesinghead Ges S       or Dry Gez         Address (Give address to which approved copy of this form is to be sent OXY NGL, Inc.       P. O. Box 300, Tulsa, OK 74102         If weil produces oil or liquids.       Unit       Sec. Twp.         It weil produces oil or liquids.       Unit       Sec. Twp.         It weil produces oil or liquids.       Unit       Sec. Twp.         It weil produces oil or liquids.       Unit       Sec. Twp.         It weil production is commingled with that from any other lease or pool, give commingling order number:       O/// Sec.         NOTE:       Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPHIANCE       OIL CONSERVATION FUNCE         I hereby certify that the information given is true and complete to the best of my knowledge and belief.       District i supervisor         Mutual M. Michan (Signalwe)       If this is a request for allowable for a newly drilled or dete with	Unit Letter <u>C</u> ; <u>1980</u> Feat From The <u>West</u> L	.ine and660 Feet From The North
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Name of Authorized Transporter of Cill       or Condensate         Mobil       Pipeline       Company         Name of Authorized Transporter of Casinghead Gas       or Dry Gas       Address (Give address to which approved copy of this form is to be sented address to which approved copy of this form address to which approved copy of this form matter address to which approved copy of this form approved copy of the sented address to which approved copy of this form approved copy of this form must be accoundance with address to which ap	III DESIGNATION OF TRANSPORTER OF OIL AND NATUR	AT GAS
Name of Authorized Transporter of Casinghead Gas (X) or Dry Gas ()       Address (Give address to which approved copy of this form is to be sent ()         OXY NGL, Inc.       P. 0. Box 300, Tulsa, 0K 74102         If well produces oil or liquida, ()       Unit () Sec. () Twp. () Rge. ()       Is gas actually connected? ()         If well produces oil or liquida, ()       E () 33 () 7S () 33E       Yes ()       6/6/66         If this production is commingled with that from any other lease or pool, give commingling order number:       NOTE: Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE       OIL CONSERVATION DIVISION         I hereby certify that the rules and regulations of the Oil Conservation Division have been completed with and that the information given is true and complete to the best of my knowledge and belief.       OIL CONSERVATION DIVISION         Mutual W. Macmau       If this is a request for allowable for a newly drilled or de well, this form must be accompanied by a tabulation of the de test taken on the well in accordance with RULE 1104.         Movember 11, 1988       (Thile)         November 11, 1988       (Date)	Name of Authorized Transporter of Cil X or Condensate	
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If well produces oil or liquids, give location of tanks.       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When         give location of tanks.       E       33       7S       33E       Yes       6/6/66         If this production is commingled with that from any other lease or pool, give commingling order number:       NOTE:       6/6/66         NOTE:       Complete Parts IV and V on reverse side if necessary.       OIL CONSERVATION DIVISION         VI. CERTIFICATE OF COMPLIANCE       OIL CONSERVATION DIVISION         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.       OIL CONSERVATION DIVISION         Mutual W.       Method Mat the information given is true and complete to the best of my knowledge and belief.       Is         Mutual W.       Method Mat the information given is true and complete to the best of my knowledge and belief.       Is         Mutual W.       Method Mat the information given is true and complete to the best of my knowledge and belief.       Is         Mutual W.       Method Mat the information given is true and complete to the best of my knowledge and belief.       Is         Mutual T.       Method Mat the information given is true and complete to the best of my knowledge and belief.       Is         Method Mat the information given is true and com	Name of Authorized Transporter of Casinghead Gas 🗶 or Dry Gas 🗌	
It will production of tents.       E       33       7S       33E       Yes       6/6/66         If this production is commingled with that from any other lease or pool, give commingling order number:       NOTE:       Complete Parts IV and V on reverse side if necessary.         VI. CERTIFICATE OF COMPLIANCE       OIL CONSERVATION DIVISION         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.       OIL CONSERVATION DIVISION         Mutual W.       Mathematical descent 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.       OIL CONSERVATION DIVISION         Mutual W.       Mathematical descent 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.       Image: Complete Production Supervisor         Mutual W.       Mathematical descent of the		
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## IV. COMPLETION DATA

Designate Type of Completion	n - (X)	New Well	Workover	)   	1 1 .	1 1	)   
Date Spudded	Date Compl. Ready to Prod.	Total Depth		•••••	P.B.T.D.	· · · · · · · · · · · · · · · · · · ·	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oll/Ga	s Pay		Tubing Dep	th c c c c	
Perfotations	We have the second s	national and anti-stability of each rate	A. 19 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 194 - 1 Second states and states	<u>. 1 ( 9146 - 31</u>	Depth Casi	ng Shoe	
AND AND THE MEAN AND TUBING, CASING, AND CEMENTING RECORD							ti Altiga
HOLE SIZE BOYON &	130 CASING & TUBING SIZE	end the second	DEPTH SE	T and a state of the	+	ACKS CEME	
HOLL SIZE		14. J. 200	المراجع المراجع المراجع المراجع	9			
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## 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 allowable for this depth or be for full 24 hours)

OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, so	Producing Method (Flow, pump, gas lift, etc.)		
Length of Test	Tubing Pressure	Casing Procesure	Choke Size		
Actual Prod. During Test	Oll-Bbis.	Water - Bbls.	Gas-MCF		
	·				

## GAS WELL

313

Actual Prod. Tost-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Teeting Method (pitot, back pr.)	Tubing Prosours (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		[	