

CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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OPERATOR	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL
WELL ☒GAS
WELL ☐

OTHER -

Name of Operator

Haverroo Operating Company, Inc.

Address of Operator

/o Oil Reports & Gas Services, Inc. P. O. Box 755, Hobbs, NM 88241

Location of Well

UNIT LETTER G, 1980 FEET FROM THE North LINE AND 1980 FEET FROMTHE East LINE, SECTION 12 TOWNSHIP 17S RANGE 32E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

4238 GR

5a. Indicate Type of Lease

State ☒Fee ☐

5. State Oil & Gas Lease No.

B-871

7. Unit Agreement Name

8. Farm or Lease Name

State "O"

9. Well No.

21

10. Field and Pool, or Wildcat

Maljamar GB - SA

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐PLUG AND ABANDON ☐REMEDIAL WORK ☐ALTERING CASING ☐TEMPORARILY ABANDON ☐CHANGE PLANS ☐COMMENCE DRILLING OPNS. ☐PLUG AND ABANDONMENT ☐PULL OR ALTER CASING ☐CASING TEST AND CEMENT JOB ☐OTHER Return to Production ☒OTHER ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Pulled rods & pump. Ran rods & new pump.
Well returned to production 4/22/85.
Pumped 80 bbls oil, 20 bbls water, 24 hours.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED

Donna HalesTITLE AgentDATE 4/24/85

COPIES TO DISTRICT SUPERVISOR

APPROVED BY

DISTRICT SUPERVISOR

TITLE

DATE

APR 26 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 25 1961

U.S. DEPT. OF
HEALTH, EDUCATION & WELFARE

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Chaveroo Operating Company, Inc.

Address
c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)
Effective 4/1/89

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "O"	Well No. 21	Pool Name, Including Formation Maljamar Gb Sa	Kind of Lease State, Federal or Fee State	Lease No. B-871
Location Unit Letter <u>G</u> : 1980 Feet From The <u>East</u> Line and <u>1980</u> Feet From The <u>North</u> Line of Section <u>12</u> Township <u>17S</u> Range <u>32E</u> , 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"/> Permian SCURLOCK PERMIAN CORP EFF 9-1-91	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, Texas 77251-1183
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co. <u>Lea</u> <u>Permian</u>	Address (Give address to which approved copy of this form is to be sent) Bartlesville, OK 74004
If well produces oil or liquids, give location of tanks. Unit <u>B</u> Sec. <u>12</u> Twp. <u>17</u> Rge. <u>32E</u>	Is gas actually connected? <u>Yes</u> when <u>4/14/60</u>

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

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.

M. J. H. H. H.
(Signature)
Agent
(Title)
4-5-89
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 7 1989, 19
BY ORIGINAL SIGNED 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 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 Forms C-104 must be filed for each pool in multiply completed wells.

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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VEHICLE	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATION	
PRODUCTION OFFICE	
Operator	

Chaverroo Operating Company, Inc.

Address

c/o Oil Reports & Gas Services, Inc., P. O. Box 763, Hobbs, NM 88241

Reason(s) for filing (Check proper box)

New Well ☐

Change in Transporter of:

Recompletion ☐Oil ☒Dry Gas ☐Change in Ownership ☐Casinghead Gas ☐Condensate ☐

Other (Please explain)

Effective 9/1/84

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
State "O"	21	Maljamar GB SA	State, Federal or Fee	B-871
Location				
Unit Letter	G	1980 Feet From The	East	Line and 1980 Feet From The
Line of Section	12	Township	17S	Range 32E, NMPM, Lea County

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)					
J. M. Petroleum Corp.	2000 N. Tower, Plaza of America, Dallas, TX					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Co.	Bartlesville, OK 74004					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	B	12	17	32E	Yes	4/14/60

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	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tanks	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 pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 above is true and complete to the best of my knowledge and belief.

(Signature)

Agent

(Title)

8/23/84

(Date)

OIL CONSERVATION DIVISION

APPROVED

AUG 27 1984

, 19

BY

Eddie W. Cook

TITLE

Oil & Gas Inspector

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

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AUG 23 1984

O.C.D.
HOBBS OFFICE