Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico rgy, Minerals and Natural Resources Departm.

Form C-104 Revised 1-1-89 See Instruction at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aztec, NM 87	¹⁴¹⁰ REC					AUTHOR					
Operator		10 18/	ANSP	OHIO	IL AND N	ATURAL G		API No.			
Chevron U.S.A.				30	30-025-04016						
Address P.O. Box 1150	Midland, T	X 7970	2								
Reason(s) for Filing (Check proper l	xox)					ther (Please exp	lain)				
New Well	Oil	Change is	Transpo								
Recompletion											
Change in Operator	Casinghe	ad Cas	Conde	ntale							
and address of previous operator _					··			· · · · · · · · · · · · · · · · · · ·			
II. DESCRIPTION OF WE	LL AND LE	EASE									
Lease Name Well No. Pool Name,					-	1		of Lease Federal or Fee	of Lease Federal or Fee Lease No.		
Northwest Eumont Unit	<u> </u>	112	Eum	ont Yate	e s		Sta				
Unit Letter L	. 1987		Coat Co	om The S	outh ,	660		eet From The	Noet		
	•				u	ne and	t	eet From The _	vest	Line	
Section 14 Tox	vnship	198	Range	36E	1,	МРМ,		Lea	- , <u></u>	County	
III. DESIGNATION OF TH	RANSPORTI	ER OF O	IL AN	D NATI	JRAL GAS						
Name of Authorized Transporter of (Pride Pipeline	Dil X	or Conden		L		ve address to w		d copy of this fo		rent)	
								Abilene, TX			
Name of Authorized Transporter of C Warren fi	Asinghead Gas		or Dry	Gas	Address (Gi	ve address to w	hich approve	d copy of this fo	rm is to be s	ent)	
If well produces oil or liquids.	Unit	Sec.	Twp.	Rge.	is gas actual	ly connected?	When	1 ?			
give location of tanks.	i	İi	<u> </u>	i		Yes		Unknown			
If this production is commingled with IV. COMPLETION DATA	that from any oti	her lease or p	pool, giv	e comming	ling order nun	iber:					
		Oil Well		as Well	New Well	Workover	<u> </u>	1			
Designate Type of Complet	ion - (X)		_	~ · · · · · · · · · · · · · · · · · · ·	i item well	WOLTONEL	Deepen	Plug Back	same Res'v	Diff Res'v	
Date Spudded	Date Com	pl. Ready to	Prod.		Total Depth	······································		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducine Fo	mation		Top Oil/Gas	Pav					
						,		Tubing Depth			
Perforations					·			Depth Casing	Shoe		
		TIDING	CACIN	C AND	CELCENTE	NO PROOF					
HOLE SIZE		TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET	<u> </u>		0/0 0514		
						DEI III DEI	 	SACKS CEMENT			
		·									
. TEST DATA AND REQU	EST FOR A	LLOWA	BLE		L			J			
OIL WELL (Test must be aft	er recovery of to	tal volume o		l and must	be equal to or	exceed top allo	wable for this	depth or be for	full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Tes	x			Producing Me	ethod (Flow, pur	np, gas lift, e	tc.)			
ength of Test	Tubing Pres	ssure			Casing Pressu	re	<u> </u>	Choke Size		·	
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF				
TAC THELL											
GAS WELL Actual Prod. Test - MCF/D	l ength of T	`aat			http://www.	40/05		· · · · · · · · · · · · · · · · · · ·			
	Longui Gr	Length of Test			Bbis. Condens	BIE/MMCF		Gravity of Condensate			
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
T 00000 1000		·									
I. OPERATOR CERTIFI	CATE OF	COMPL	IANC	E		NI COM	CEDV/A	TIOND			
I hereby certify that the rules and reg Division have been complied with as	nd that the inform	nation given	tion above			IL CON		TION D		N	
is true and complete to the best of m	y knowledge and	belief.	•	}	Date	Approved	Ţ.	1AY 22'9	2		
OV Pinlan					Dale	whhioved					
Signature Signature					By						
J. K. Ripley Printed Name		Tech As		nt	_,	· · · · · · · · · · · · · · · · · · ·	······································		(
5/20/92		(915)68	ide 7-714	8	Title_						
Date		Telepho		-							

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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OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aztec, NM 874	10 REQ				BLE AND						
Operator								API No. -025-04016			
Address P.O. Box 1150		V 7070	^				30	-025-0401	ь		
Reason(s) for Filing (Check proper bo		X /9/0			Oth	net (Please exp	Jain)				
New Well Recompletion Change in Operator	Oil	Change in X	Dry Go	. 📮		et (i ieuse exp					
If change of operator give name and address of previous operator						·			· 		
II. DESCRIPTION OF WEL	L AND LE		.,								
Pool Name, I Northwest Eumont Unit 112 Eumont				_			of Lease Federal or Fee	Federal or Fee			
Location Unit Letter	, 1987		_ Feet Fr	rom The Sc	outh Lin	e and _660		eet From The	Vest	Line	
Section 14 Town	nship 1	195	Range	36E	, N	мрм,		Lea County			
III. DESIGNATION OF TRA	ANSPORTI	TR OF O			DAL CAS						
Name of Authorized Transporter of Oi Navajo Refining Co.		or Conde			Address (Giv			d copy of this fo		ieni)	
Name of Authorized Transporter of Ca	singhead Gas		or Dry	Gas 🗍	Address (Giv			rtesia, NM copy of this fo			
Warren Petro	leiem	1	,								
If well produces oil or liquids, give location of tanks.	sces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? Yes					When		nown			
If this production is commingled with the IV. COMPLETION DATA	nat from any of										
Designate Type of Completion	on - (X)	Oil Well	. (Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Com	ste Compl. Ready to Prod. Tota		Total Depth	Total Depth			P.B.T.D.			
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas I	Pay	······································	Tubing Depth			
Perforations					<u> </u>			Depth Casing	Shoe		
	7	UBING,	CASIN	IG AND	CEMENTIN	NG RECOR	D				
HOLE SIZE	CA	CASING & TUBING SIZE				DEPTH SET		SACKS CEMENT			
	_										
TEST DATA AND REQUI							<u></u> -	J			
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Te	tal volume i	of load o	il and must	be equal to or a Producing Met	exceed top allo	mable for this	depth or be for	full 24 hou	rs.)	
ength of Test	Table - De						7.8	·			
	Tubing Pre	ssure			Casing Pressur	re		Choke Size			
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbls.			Gas- MCF			
GAS WELL				<u></u>							
actual Prod. Test - MCF/D	Length of T	cat			Bbls. Condens	te/MMCF		Gravity of Con	densate		
sting Method (pilot, back pr.)	Tubing Pres	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
T. OPERATOR CERTIFIC 1 hereby certify that the rules and regularisis have been complied with and is true and complete to the best of my	lations of the (Dil Conserva	ttion	CE	0	IL CON	SERVA	TION D	IVISIO	\ N	
$\alpha \nu \rho i h$		s veilei.			Date /			APR 28			
Signature Signature					By_ WELLIAL SIGNED BY RAY SINTH						
J. K. Ripley Printed Name 4/23/92					Title						
Date			one No.	1.1							

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