Submit 5 Copies Appropriate District Office DISTRICT 1 P. O. Box 1980, Hobbs, NM 88240

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator										
Chevron U.S.A., Inc.							We	il API No.		
Address		30 - 025-30990								
P. O. Box 1150, Midland, TX Reason (s) for Filling (check proper bo	79702				_					
New Well					Oth	iei (Please ex	xplain)			
Recompletion	Chan Oil	ige in Trans		E						
Change in Operator	Casinghead Ga	26	Dry G							
f chance of operator give name		<u>"</u>	Conde	nsate						
and address of previous operator				_						
DECCRIPTION OF THE										
I. DESCRIPTION OF WELL case Name	L AND LEASE									
· · · · · · · · · · · · · · · · · · ·		Well No.	Pool Name,	Including Fo	rmation		Kin	d of Lease	T	
R. R. Bell (NCT-F)		3	F	am4 (C				e, Federal or Fee	Lease No	
Location		12 1	Eum	ont Gas						
Here I										
Unit Letter F	:	1520	Feet From Th	ne North	l Line	e and	1820	F .F		
Section 36 Townsh	nip 20 S						1020	_ Feet From The	West Lin	
			Rang	36E	, NN	ΔPM,	Lea		County	
II. DESIGNATION OF TRA ame of Authorized Transporter of Oil	INSPORTER ()F OIL A	ND NAT	URAL GA	S				County	
or reasonable Transporter of Oil		or Condens	sate	Addre		e address to	which approx	ed come of this	orm is to be sent)	
							шен шррго	rea copy of inis fo	orm is to be sent)	
ame of Authorized Transporter of Casi	inghead Gas	or D	v Gas	X Addre						
Varren Petroleun Co. well produces oil or liquids,			, 543	Addre	P O Roy	e address to	which approv	ed copy of this fo	orm is to be sent)	
ve location of tanks.	Unit	Sec.	Twp. Rge	e. Is gas a	ctually conn		Isa, OK 74	102		
and the state of t		ŀ			y com	icella !	wnen /			
this production is commingled with the					Yes			03/01/94		
this production is commingled with the COMPLETION DATA	at from any other lea	ise or pool,	give commin	gling order nu	mber:			50/01/74		
		Oil Well	<u> </u>	T						
Designate Type of Completic	on - (X)	On well	Gas Well	New Well	Workover	Deepen	Plugback	Same Res'v	Diff Res'v	
ate Spudded	Date Compl. Re	ady to Prod.	<u></u>	Total Depth						
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation				rotal Depth			P. B. T. D.			
	on	Top Oil/Gas Pay			Tubing Depth					
forations										
		_					Depth Casin	g		
		BING, CAS	TNO AND C	EMENTING	DECORD		L			
HOLE SIZE	TU	TUBING, CASING AND CASING & TUBING SIZE						CACVC OD CO.		
HOLE SIZE	CASING &	& TUBING.	SIZE				·	SACKE OF	Name and the same	
HOLE SIZE	CASING &	& TUBING	SIZE		EPTH SET			SACKS CE	MENT	
HOLE SIZE	CASING &	& TUBING	SIZE					SACKS CE	MENT	
	CASING	x TUBING	SIZE					SACKS CE	MENT	
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TEST DATA AND REQUE	CST FOR ALL	WADI I	SIZE	D	EPTH SET					
TEST DATA AND REQUE	CASING	WADI I	SIZE	D	EPTH SET	allowable fo	or this depth o	or he for full 24 h		
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- 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
- 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.