

**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

**P.O. Box 2088  
Santa Fe, New Mexico 87504-2088**

# REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Chevron U.S.A. Inc		Well API No. 30-025-31112	
Address P.O. Box 1150, Midland, TX 79702			
Reason(s) for Filing (Check proper box)			
New Well	<input checked="" type="checkbox"/>	<input type="checkbox"/> Other (Please explain)	
Recompletion	<input type="checkbox"/>	Change in Transporter of:	
Change in Operator	<input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
		Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator			

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Free	Lease No.
Eunice Monument South Unit B	881	Eunice Monument GB/SA		
Location				
Unit Letter <u>K</u> : <u>2080</u> Feet From The <u>South</u> Line and <u>1880</u> Feet From The <u>West</u> Line				
Section <u>13</u> Township <u>20S</u> Range <u>36E</u> , NMPM, Lea County				

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)		
Shell Pipeline					P.O. Box 1910, Midland, TX 79701		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)		
Warren Petroleum/Phillips Natural Gas Co.					P.O. Box 1589, Tulsa OK 4001 Penbrook, Odessa		
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 13	Twp. 20S	Rge. 36E	Is gas actually connected? Yes	When? 4/16/91	TX

If this production is commingled with that from any other lease or pool, give commingling order number:

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 1/17/91	Date Compl. Ready to Prod. 4/15/91		Total Depth 4000'			P.B.T.D. 3960'			
Elevations (DF, RKB, RT, GR, etc.) 3551' GR	Name of Producing Formation Grayburg/ S.A.		Top Oil/Gas Pay 3764'			Tubing Depth 3944'			
Perforations 3764'-3930'						Depth Casing Shoe 4000'			
<b>TUBING, CASING AND CEMENTING RECORD</b>									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12 1/4"	#32 - 8 5/8"		1071'			750sx "C" Circ 170sx			
7 7/8"	#17 - 5 1/2"		4000'			600sx "C" Circ 70sx			
	2 3/8" Tbg		3944'			-----			

**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 Tank 4/18/91	Date of Test 4/21/91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 35	Casing Pressure 75	Choke Size 30/64
Actual Prod. During Test	Oil - Bbls. 19	Water - Bbls. 323	Gas - MCF 26

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method ( <i>pilot, back pr.</i> )	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 *D.M. Bohon*  
 Printed Name D.M. Bohon Technical Assistant  
4/30/91 Title  
 Date (915) 687-7148  
 Telephone No.

Date Approved MAY 6 1991  
By ORVILLE L. ...  
Title ...

- 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.