State of New Mexico E 3y, Minerals & Natural Resources Department

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
811 S. 1st Street, Artesia, NM 88210-2834
District III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, NM 87504-2088 Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

strict IV) Box 2088, Santa	Fe NM 87	504-2088		Santa re	E, 141V	10/304	-2000				MENDED REPO		
, Box 2000, Sauta			r for a	LLOWAE	BLE A	AND AU	U THO	RIZAT	ION TO TR	ANSPOI	RT		
			rator name ar						² O	GRID Numbe	er		
Chevron U.S.A. Inc.							4323				ECTIVE 1-1-94		
P.O. Box 1150											Code		
									CO				
1idland, TX 79702 4 API Number							5 Pool Name				6 Pool Code		
										10100			
30-025-06945 7 Property Code 8						Drinka Property N				19190 9 Well Number			
	-		Central Drinkard Unit						152				
002000					Centr	ai urink	cara un	1τ			132		
[. "	Surface	Location			T		1		T . C	ne County			
L or lot no.	Section	Township	Range	Lot. Idn	1	rom the		outh Line	Feet from the	East/West li			
0	32	215	37E	<u></u>		766	Sc	outh	1874	East	Lea		
11	Bottom	Hole Lo	cation										
JL or lot no.	Section	Township	Range	Lot. Idn	Feet f	rom the	North/S	outh Line	Feet from the	East/West 1	ine County		
			İ				<u> </u>		,	<u> </u>			
Lse Code	¹³ Produc	ing Method Co	ode 14 Gas	Connection Date	e 15	C-129 Per	mit Numb	er 16	C-129 Effective	Date 17	C-129 Expiration D		
Р		P		Unknown									
I. Oil an	d Gas T	ransport	ers										
8 Transporter		19 Tra	insporter Nar	ne	20 POD		21 O/G	22 POD ULSTR Location					
OGRID		a	nd Address						and Description				
022628	Tex	as New He	xico Pipe	eline		07170	10	0	Texas-New Mexico Pipeline				
022020	P.C). Box 55 6							transports the oil on this well.				
	Der	ver, CO	80217						F-33-21-37				
-022507	Tex	(aco				28054	149	G		nsports t	he gas on this		
	**********). Box 300				440 mm m m			well. F-32-21-37				
	OCCOUNTED TO THE	lsa, OK 74							Neither EOTT nor Warren transports				
	E01	T, Warren	1						neither Edil nor warren transports on this well.				
									on this we	11.			
				,,			·····						
							900 4 200						
W Decdu	and We	tor					************		×				
V. Produ	iceu wa	iter			2	4 POD UL	STR Loca	tion and De	scription				
0717		<u> </u>											
V. Well C		ion Data	26 Ready Date			27 TD 22		²⁸ PBTD		²⁹ Perforations			
²⁵ Spud	Date		20 Ready Date			- 10							
20.	o'		31 Cas	ing & Tubing Si	76		32	Depth Set		33 Sac	eks Cement		
	Hole Sie		³¹ Casing & Tubing Size										
									1				
													
VI. Well	Test Da	ta							20 mi D		30 Con Paragraph		
34 Date New Oil 35 Gas Deli			very Date 36 Test Date			37 Test Length			38 Tbg. Pressu	ire	³⁹ Csg. Pressure		
40 Choke Size		41 Oil 42 Water					43 Gas		44 AOF 45 Test		45 Test Method		
46	.:6	l-a of the Oi	1 Concernation	on Division have	heen	Ir de la companya de	 			NI DIVICI	ON		
40 I hereby cer	tily that the	rules of the Of information gi	ven above is	true and comple	te to			orr co	ONSERVATIO	DN DIÁI2I	UN A		
he best of my	knowledge a	nd belief.				Approve	d by:						
Signature:	Donse	i Dh	ay			!							
Printed name:	V		0			Title:							
Sonja Gray							AI Date						
Title: Technical Assistant						Approval Date: CCT 2 0 1935							
			Phone:	015 607 7	340	1							
10/1	8/95		<u>. L </u>	915-687-7									
⁴⁷ If this is a	change of o	perator fill in t	he OGRID n	umber and name	of the p	previous op	erator						
							atmac 4 NV			Title	Date		
	P	revious Opera	tor Signature			P	rinted Nar	IIO		11110	24		

P.·O. Drawer DD, Artesia, NM 88210

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

DISTRICT II



State of New Mexico 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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

T	1011		·- · · • ·		-	•				
I. Operator				****			API No.			
Chevron U.S.A., Inc.						30 -	025-06945			
Address P. O. Box 1150, Midland, TX 797	702									
Reason (s) for Filling (check proper box)				Othe	(Please exp	lain)				
New Well		ransporter of:	_							
Recompletion Change in Operator	Oil Casinghead Gas	X Dry Gas Condens								
If chance of operator give name										
and address of previous operator		·								
II. DESCRIPTION OF WELL A	AND LEASE									
Lease Name	Well	No. Pool Name, L	ncluding For	mation		l l	of Lease	Lease No.		
Central Drinkard Unit	152	Drink	ard		-	State,	Federal or Fee			
Location										
W. W. W. O.	: 0766	Feet From The	South	Line	and	1874	Feet From The	East Line		
Unit Letter O		reet Floin The	South	Luie		10/4	- 1 cct I tolli I lic			
Section 32 Township	21S	Rang	37E	, NM	РМ,	Lea		County		
III. DESIGNATION OF TRANS	SPORTER OF O	IL AND NATU	RÀL GA	S						
Name of Authorized Transporter of OilEO	T Energy Figo	indenset	Addre	ss (Give	address to	which approv	ed copy of this f	orm is to be sent)		
EOTT Oil Pipeline Co.	Exective 4-1-9)4 🖳						66, Suite 2604		
Name of Authorized Transporter of Casingh		or Dy Gas	Addre	ess (Give	address to	which approv	ed copy of this f	orm is to be sent)		
If well produces oil or liquids,	Unit Sec.	Twp. Rge	Is gas a	ictually conne	ected ?	When ?				
give location of tanks.	0			·			** .			
		1,	<u></u>	Yes		L	Unknown			
If this production is commingled with that for IV. COMPLETION DATA	rom any other lease or	pool, give comming	ing order nu	ımbe <u>r:</u>						
IV. COMPLETION DATA	Oil '	Well Gas Well	New Well	Workover	Deepen	Plugback	Same Res'v	Diff Res'v		
Designate Type of Completion					<u> </u>					
Date Spudded	Date Compl. Ready to	o Prod.	Total Dept	h		P. B. T. D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing F	ormation	Top Oil/Ga	ıs Pay		Tubing Depth				
	<u> </u>		<u>. </u>			Depth Casin; g				
Peforations						Depin casii	41 B			
Hot Borge	TUBING CASING & TU	G, CASING AND C		G RECORD DEPTH SET		SACKS CEMENT				
HOLE SIZE	CASING & TU	BING SIZE	 	DEPTH SET		SACKS CEMENT				
			 							
V. TEST DATA AND REQUES	T FOR ALLOW	ABLE				'				
OIL WELL (Test must be after re	ecovery of total volume							hours)		
Date First New Oil Run To Tank	Date of Test		Producing	Method	(Flow, pum	p, gas lift, etc.)				
Length of Test	Tubing Pressure		Casing Pre	ssure		Choke Size				
	Oil - Bbls.		Water - Bb	de .		Gas - MCF				
Actual Prod. During Test	Oil - Bois.		water - Bo	us. 		Gas - MCI				
GAS WELL										
Actual Prod. Test - MCF/D	Length of Test		Bbls. Cond	lensate/MMC	F	Gravity of Condensate				
Testing Method (pilot, back press.)	Tubing Pressure (Shu	ıt - in)	Casing Pressure (Shut - in)			Choke Size				
(5.5.5)	`					<u> </u>		···		
						SEDVAT	TON DIVI	CION		
I hereby certify that the rules and regulat				Oil	L CON	CHVAI	TION DIVI	SIUN		
Division have been complied with and the is true and complete to the best of my kn		en adové	Date	Date Approved MAD 0.4.4004						
Or Pinland							MAK U4	1994		
AT EDUCE	·- <u></u>		By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERIORS							
Signature / / J. K. Ripley	T.A.		Title	•	DIS	TRICT I SU	PERVISOR	X (ON		
Printed Name	Title							·····		

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.

(915)687-7148 Telephone No.

blank

1/27/94

Date