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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## 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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator								Well	API No.		
Chevron U.S.A.,	Inc.								30-025-07	003	
Address						_					
P. O. Box 670, Reason(s) for Filing (Check proper box)	Hobbs,	New M	exico	88	24		- Thi				
New Well		Change is	a Transev	orter of:		Oth	er (Please expl	ain)			
Recompletion	Oil		Dry Ga		$\overline{\mathbf{X}}$						
Change in Operator	Casinghe	ad Gas	Conder	_							
If change of operator give name and address of previous operator					_						
II. DESCRIPTION OF WELL	AND LE	ASE									•
Lease Name						ing Formation		Kind	of Lease No.		
Mark Owen	4 Blineb								Federal or Fee		
Location											
Unit Letter	_:	068	_ Feet Fr	rom The		South Line	20 and	68 <b>F</b>	eet From The	East	Line
Section 34 Townshi	<b>p</b> 2	ls	Range		_37	7E , NI	мрм,	Lea			County
III DESIGNATION OF TRANS	CDODEE	OF O	•• ••								
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTE	or Conde			TU		a addraga to sul		copy of this form	<del></del>	<del>-                                    </del>
Shell Prail	٠	0. 0000		X		Audices (Oth	E CALLED ESS TO WI	исп арргочес	copy of this form	is io be se	nt)
Name of Authorized Transporter of Casin	ghead Gas		or Dry	Gas [	XI	Address (Gin	e address to w	ich approved	come of this form	is to be se	me!
Northern Natural Gas Company						Address (Give address to which approved copy of this form is to be sent)  2223 Dodge St - 8th Floor Omaha, NE 68102					
					lge.	is gas actually		When			
	<u> </u>	L	L			Ye	2s		6/7/9	0	
If this production is commingled with that IV. COMPLETION DATA	from any oth	ner lease or	pool, giv	e comm	ingl	ing order numb	er:	<del></del>			
Designate Type of Completion	- (X)	Oil Well		Jas Wel	1	New Well	Workover	Deepen	Plug Back Sam	ie Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.					Total Depth		1	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
Perforations											
. Growing									Depth Casing She	oe .	
	7	TIRING	CASIN	JC: AN	ID.	CEMENTIN	IC PECOD	<u> </u>			
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				10		DEPTH SET	<u> </u>	SACKS CEMENT		
	Original Testing Circ						<u> </u>		SACKS CEMENT		
						*					
V. TEST DATA AND REQUES	T FOR A	HOW	DI E								
				.il lis		h					
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Te	ti votane	oj ioda o	u ana n	1431	Producing Me	thed (Flow mu	wable for this	depth or be for fu	ll 24 hour.	s.)
	Producing Method (Flow, pump, gas lift, etc.)										
Length of Test	Tubing Pressure				Casing Pressur	re	· · · · · · · · · · · · · · · · · · ·	Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF			
CLO TIPL:		· · · · · · · · · · · · · · · · · ·		<del></del> -							
GAS WELL Actual Prod. Test - MCF/D	1										
Actual Prod. Test - MCF/D	Length of Test					Bbls. Condens	ate/MMCF		Gravity of Condensate		
Testing Method (pilot, back pr.)	g Method (pitot, back pr.) Tubing Pressure (Shut-in)					Carlai Nation	(8)		A 31- 81-		
	recome (Snur-m)					Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFICA	ATE OF	COMP	IIAN	CE	$\neg$				<u> </u>		
I hereby certify that the rules and regulations of the Oil Conservation						IL CON	SERVA	ATION DIV	/ISIO	N	
Division have been complied with and that the information given shove										-	
Is true and complete to the best of my knowledge and belief.					Date	Approved	i			į:	
Lesse and							p				
Signature					By ORIGINAL SEGMENT BY JUNEY SEXTON						
C. L. Morrill NM Area Prod. Supt.						'-		DISTRIC	i surerviso	K	·····
8/2/90	15	i05) 393	Title 1-2	1		Title_					
Date			hone No		. [						·

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.