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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Chevron U.S.A.		Well API No. 30-025-08767
Address P.O. Box 1150, Midland, TX 79702		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input checked="" 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		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Harry Leonard (NCT-D)	Well No. 16	Pool Name, Including Formation Jalmat Gas	Kind of Lease State, Federal or Foreign XXXXXX	Lease No.
Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line Section 3 Township 22S Range 36E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil N.A.	<input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas Northern Natural Gas Co.	<input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 2223 Dodge St., 8th Floor, Omaha, NE 68102				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? Yes	When? 4/2/91
If this production is commingled with that from any other lease or pool, give commingling order number.						

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
XXXXX		XX		XX		XX		
Date Started 1/14/91	Date Compl. Ready to Prod. 1/22/91	Total Depth 3835'	P.B.T.D. 3725'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Jalmat	Top Oil/Gas Pay 3278'	Tubing Depth 3180'					
Perforations 3278'-3640'			Depth Casing Shoe 3835'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8" #32	403'	325 sx Linc					
7 7/8"	5 1/2" #14	3835'	400 sx TOC@787'					
	2 3/8" Tbg.	3180'						

V. TEST DATA AND REQUEST FOR ALLOWABLE

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D 458 mcf/d	Length of Test 24hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate N.A.
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 128	Casing Pressure (Shut-in) 0	Choke Size 25/64

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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 Technical Assistant
Printed Name Title
Date 4/4/91 (915) 687-7148 Telephone No.

OIL CONSERVATION DIVISION

Date Approved

By

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.