

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Chevron U.S.A. Inc. P.O. Box 1150 Midland, TX 79702		² OGRID Number 4323
		³ Reason for Filing Code NW
⁴ API Number 30-025-33891	⁵ Pool Name EUMONT;YATES-7 RVRS-QUEEN (PRO GAS)	⁶ Pool Code 76480
⁷ Property Code 2565	⁸ Property Name THEODORE ANDERSON	⁹ Well Number 11

II. ¹⁰ Surface Location

UL or lot no. F	Section 17	Township 20S	Range 37E	Lot. Idn	Feet from the 1980	North/South Line NORTH	Feet from the 2310	East/West line WEST	County LEA
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¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Lse Code S	¹³ Producing Method Code F	¹⁴ Gas Connection Date 4/18/97		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date	

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
024650	WARREN PETROLEUM P. O. BOX 1589 TULSA, OK 74102	2819201	G	F-17-20S-37E

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description

V. Well Completion Data

²⁵ Spud Date 3/25/97	²⁶ Ready Date 4/18/97	²⁷ TD 3500'	²⁸ PBSD 3475'	²⁹ Perforations 3165' - 3438'
³⁰ Hole Size 12-1/4"	³¹ Casing & Tubing Size 8-5/8"	³² Depth Set 520'	³³ Sacks Cement 300	
7-7/8"	5-1/2"	3500'	750	
	2-3/8"	3475'		

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date 4/18/97	³⁶ Test Date 5/9/97	³⁷ Test Length 24 HRS	³⁸ Tbg. Pressure 350#	³⁹ Csg. Pressure 0
⁴⁰ Choke Size W.O.	⁴¹ Oil 0	⁴² Water 0	⁴³ Gas 521	⁴⁴ AOF	⁴⁵ Test Method FLOWING

I hereby certify that the rules 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: *J. K. Ripley*
Printed name: J. K. RIPLEY
Title: TECHNICAL ASSISTANT
Date: 5/20/97 Phone: (915)687-7148

OIL CONSERVATION DIVISION			
Approved by:			
Title:			
Approval Date:			

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date
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